

PALM BEACH COUNTY VETERANS DAY PARADE

Sunday, November 7, 2021

ENTRY DEADLINE: FRIDAY, NOVEMBER 1, 2021

PARTICIPATION AGREEMENT

(Please Print)

Organization Name: _____

Contact Name: _____ Title: _____

Address: _____

City: _____ State _____ Zip: _____

Phone: _____ Cell Phone: _____ Email: _____

Website: _____ Facebook Page: _____

Group Description:

(Veterans, Active Duty, Uniformed Services, Color Guard, Community, School, Civic, Corporate)

Vehicle Type(s) & Quantity Description:

(Car, Truck, Motorcycle)

Total Length in Feet Needed: _____ Total Number of Participants: _____

Please provide brief description of your organization for announcements during the parade:

(Attach additional page as needed)

**Rain or Shine Line Up: 12:00 p.m. at Clematis & Tamarind Street
The Parade begins PROMPTLY at 2:00 p.m. and ends at Centennial Square
ALL Groups must have signage/banner identifying their organization.**

Please note that only the United States of America and/or current US Military Flags are allowed in the parade.

I, the undersigned, do hereby affirm that I am authorized representative of the above organization with regards to its participation and placement in the 2019 Veteran's Day Parade. I understand that submission of this application does not guarantee my group's participation in the parade, and that the parade organizers will determine our participation upon review of this application. I also affirm that I and my group understand that the purpose of the 2019 Veteran's Day Parade is to recognize military service, not to endorse or support any political agenda or candidate, and that any individual and/or group that attempts to use the parade as a forum for this purpose may be denied participation. Also, anyone (organization or individual) with automobiles, floats, or motorcycles in the parade MUST have proof of insurance and be able to produce it when requested. Upon acceptance, participants will receive a parade packet that consists of instructions, parade information and timeline for submission of supplemental materials if necessary.

Printed Name of Representative _____

Signature of Representative _____

Date _____

**FOR QUESTIONS, INFORMATION, OR TO RETURN THIS FORM:
sstjohn@pbcveteranscommittee.org**

*The Palm Beach County Veterans Committee has an established relationship with the Friends of Veterans, Inc. Donations are fully tax-deductible to the extent allowed by law. FRIENDS OF VETERANS, INC. IS AN OFFICIALLY REGISTERED 501(C)(3) ORGANIZATION. A COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING 1-800-435-7352. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL OR RECOMMENDATION BY THE STATE. Registration No. CH6126.

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