St. Clair Sesquicentennial Parade Application Form

Organization Name: _____

Type of Entry: Float ☐ Band ☐ Antique Vehicle ☐ Walking Unit ☐ Police/Fire/ Military ☐

Authorized Representative Name: _____

Address of Representative: _____

City State/Province

Postal Code/Zip Code _____ Phone ( ) _____

Cellular Phone Number ( ) _____ Email Address _____

Is Your Entry: Commercial/Business ☐ Political Group or Candidate ☐ Non-Profit/Service Group ☐

Address of Organization if Different than Above: _____

_____

Provide a Complete Description of Your Entry:

Please completely fill in the information that applies to your organization or entry. Please list the total number in your unit, age span, colors, logos, background information (year found, etc.) attire, names and titles of lead members. ***This information will be used by Cable Television and the Parade Announcer as you pass by…so tell us about your group! (Use back of form if necessary)***

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COMPLETE AND RETURN this form no later than May 15th to St. Clair Sesquicentennial Parade Committee, 547 N. Carney Drive, St. Clair, MI 48079. **Fax-810-329-5299** **Applications received after May 15th may be assigned positions later in the parade lineup.**

Contacts: **Robert Scharnweber Chairman (810) 240-3713 scharney51@msn.com**
Donald Barnum Co-Chairman (810) 434-0509 drbarnum@comcast.net