



Spring Lake Park Tower Days

Parade Unit Application Form

Parade Date: Thursday, June 10, 2010 – 7:00 p.m. Rain or shine!
Application deadline: May 21, 2010

PLEASE CHECK THE APPROPRIATE LINE

FLOATS

- Royalty Float
- Specialty Float (Business)
- Non-profit Float (Club, School, Scout)

VEHICLES

- Convertible, Truck, Fire Engine
- Classic Vehicle (1978 or older)

WALKING PERFORMING UNITS

- Color Guard
- Junior Unit (Baton, Gymnastics, etc)
- Musical Unit (Corps, Dance Studio, etc)
- Specialty Unit (Clowns, Unicycles, Bikes)

WALKING NON-PERFORMING UNITS

- Political Candidate/Official
- Radio Station
- Club (scouts, booster clubs)
- Business or other



Unit Information

Unit Name _____

Sponsor _____ (Non-performing units with commercial signs must pay a \$50 commercial fee).

Contact Person: _____

Address: _____

City: _____ Zip: _____

Phone Numbers: (H) _____

(W) _____ (C) _____

E-mail address: _____

Our unit will have music: Yes _____ No _____

Approx. # of feet needed for your unit _____ ft.

Special request: _____

PLEASE SEE OTHER SIDE



Please complete this application form no later than May 21, 2010

Vehicle Insurance Information

A copy of insurance information must be submitted before parade day.

All applicable fees must be received in the office no later than May 21, 2010

SPONSOR SIGNS: A \$50 fee will be charged to groups with commercial sponsor signs.

The fee can be paid with the application or you may give in-kind services or sponsor another event to help defray costs.

Insurance Company _____ Policy No. _____

Agent's Name _____ Phone No. _____

Address _____ City _____ State ____ Zip _____

Driver's Full Name _____

License No. _____ State _____

Address _____ City _____ State ____ Zip _____

Home Phone (____) _____ Work Phone (____) _____

Vehicle Insured Make _____ Model _____ Year _____

Plate Number _____ Expiration Date _____ Color _____

NAMES OF UNIT PARTICIPANTS

(Miss/Riders/Titles/Drum Majors/Leaders)

Name _____ Title _____

Name _____ Title _____

Name _____ Title _____

Name _____ Title _____

Name _____ Title _____

Name _____ Title _____

Name _____ Title _____

Name _____ Title _____

Name _____ Title _____

Name _____ Title _____

Script Info for Cable Cast: PLEASE PRINT description of your unit and any special information (ie. past awards, recognition, interesting facts) you want to share with viewing audience. If you already have script info typed up, please enclose with your application.
