

PARTICIPANT Application Form

Please complete ALL areas that apply to your group

NAME OF UNIT:					
CONTACT PERSON:		E-MAIL:			
ADDRESS:					
PHONE NUMBERS:		HOME:		WORK:	
		CELL:		FAX:	
TYPE OF UNIT:	Float	Motorized	Cheerleading Unit	Color Guard	Equestrian
	Marching Unit	Ethnic Organization	Military Unit	Other (Specify):	

REVIEWING STAND INFORMATION:			
Unit Leader (as of March, 2010) (include name and correct title)			
Number in unit		Picture attached? (MANDATORY IF FIRST TIME IN PARADE)	YES / NO
Number of Vehicles/Floats			
Detailed description of vehicles/floats			
Will your unit be playing music by any means? If YES, describe amplification (if any) in the space below.			YES / NO

Does your unit have a Color Guard?	YES / NO
Number and Description of any support personnel	
Please attach a biographical description (25 WORDS MAX) of your band (MANDATORY FOR ALL GROUPS)	
Do you march with another organization? If YES, please list the name(s) in the space below. If they are not included in this application, they will NOT be permitted in the Parade	YES / NO

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Please contact us about purchasing an ad in the Parade Guide:		YES / NO
We do not object to sponsorship of our band:		YES / NO
OTHER PARADES:	Please list up to three of the most recent parades in which your band has participated.	
	Parade	Date
	1.	
	2.	
	3.	
INITIAL AT RIGHT TO ACKNOWLEDGE:	FAMILY MEMBERS MAY NOT MARCH WITH ANY PARADE MARCHING UNIT, AND ARE ALSO STRONGLY DISCOURAGED FROM TRAILING THE MARCHING UNIT ALONG THE PARADE ROUTE, AS THIS IS A DISRUPTION AS WELL AS A SAFETY ISSUE TO BYSTANDERS.	
INITIAL AT RIGHT TO ACKNOWLEDGE:	APPLICANT ACKNOWLEDGES RECEIPT OF A COPY OF THE OFFICIAL RULES AND REGULATIONS FOR THE 2010 BALTIMORE ST. PATRICK PARADE, AND AGREES TO COMPLY THEREWITH. VIOLATORS ARE SUBJECT TO EXPULSION FROM THE PARADE.	
INITIAL AT RIGHT TO ACKNOWLEDGE:	INDEMNIFICATION: IN CONSIDERATION OF THE PARADE COMMITTEE'S APPROVAL OF THE PARTICIPATION OF THE APPLICANT IN THE PARADE, IN THE EVENT THAT SUCH APPROVAL IS GIVEN, APPLICANT HEREBY INDEMNIFIES AND HOLDS HARMLESS ST. PATRICK CELEBRATIONS, INC. AND ITS OFFICERS, AGENTS, AND MEMBERS FROM AND AGAINST ALL CLAIMS, CAUSES OF ACTION, COSTS, EXPENSES AND LIABILITIES, INCLUDING LEGAL EXPENSES, OF ANY KIND WHATSOEVER, INCLUDING BODILY INJURY, DEATH, PROPERTY DAMAGE, AND ANY OTHER LOSS, ARISING OUT OF OR RELATING TO APPLICANT'S PARTICIPATION IN THE PARADE, WHETHER OR NOT CAUSED BY NEGLIGENCE OF ANY PERSON INDEMNIFIED HEREUNDER.	

BY SUBMITTING THIS APPLICATION, WE AGREE TO ABIDE BY THE PARADE RULES AND REGULATIONS, AND TO SUBMIT TO THE AUTHORITY OF THE PARADE ORGANIZERS IN ALL MATTERS RELATED TO PARADE ACTIVITIES IMMEDIATELY PRIOR TO THE PARADE AND DURING THE PARADE.

_____	_____
DATE	SIGNATURE

	PRINT NAME/TITLE OF PERSON SIGNING:

Return completed application via US Mail to:

**St. Patrick Celebrations, Inc.
ATTN: Parade Applications
1306 Argonne Drive • Baltimore, MD 21218**

E-mail questions may be directed to: joannamiskellycox@verizon.net