

# PLYMOUTH ON PARADE

## SEPTEMBER 12, 2020

### ENTRY FORM & WAIVER:

Parade line up: 9:00 a.m. – Parade start time: 10:30 a.m.

**COMPLETE BOTH SIDES OF THIS ENTRY FORM AND RETURN  
WITH ENTRY FEE BY FRIDAY, AUGUST 28, 2020.**

Unit Name: \_\_\_\_\_

Main Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

### PARADE UNIT INFORMATION

☐ Business \$100

☐ School \$25

☐ City Council

☐ Politician \$25

☐ Marching Band - Fee Waived

☐ City Department

☐ Non-Profit \$25

☐ Hired Performer - Fee Waived

☐ Sponsor - Fee Waived

### PARADE UNIT TYPE (Due by August 28, 2020)

☐ Walkers

☐ Float

☐ Bus

☐ Car/Truck

☐ Vehicle & Trailer

☐ Other

### PARADE UNIT LENGTH

Overall Length \_\_\_\_\_ feet

Total Number of Participants \_\_\_\_\_

### MUSIC

☐ WILL have music

☐ WILL NOT have music

## PARADE UNIT COMMENTARY INFORMATION (Due: August 28, 2020)

CCX Media will be announcing and televising the parade.

Please submit a description (25 words or less) for your parade unit and/or organization in the space below. If you do not complete this area, we will announce your parade unit by the name of your organization.

### COMMENTARY:

## ENTRY FEE PAYMENT (Due at the time of registration)

☐ Check Enclosed (make checks payable to: City of Plymouth)

☐ Credit Card (circle one): Visa / MasterCard / Discover / American Express

Card Holder Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

## CITY OF PLYMOUTH - EVENT LIABILITY WAIVER

THE UNDERSIGNED, for myself, my heirs and assigned, in consideration of being allowed to participate in the community parade on September 12, 2020 hereby releases the City of Plymouth, its elected officials, employees, and agents from any liability for injuries, death, or property damage the undersigned may incur as a result of participating in the parade, preparing for the parade, or in any other way associated with the parade whether or not the injuries, death, or damage resulted from negligence or gross negligence of the parties being released.

Dated: \_\_\_\_\_, 2020

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

### MAIL COMPLETED FORM AND ENTRY FEE TO:

Plymouth Parks & Recreation Department  
Attn: Plymouth on Parade  
3400 Plymouth Blvd  
Plymouth, MN 55447

