

Blowing Rock Parks and Recreation Christmas Parade Entry Form

Individual, Group, or Organization's Name: _____
Contact Person: _____
Day Time Phone #: _____ Cell Phone #: _____
Mailing Address: _____
E-mail (required): _____

Please help us to organize the parade by providing the following information. We understand it may be hard to provide exact numbers; please estimate maximum number expected. Circle as many as applicable for your entry.

A. Vehicles:

1. How many motorized vehicles in your group? _____
 2. What type, make, and model? _____
 3. How long is the vehicle? _____
- * Please NO Santa Clause***

B. Walkers:

1. How many walkers in your group? _____
 2. Will they be wearing any costumes? Yes / No
If yes, what are they? _____
- *Please NO Santa Clause***

C. Homemade Floats:

1. Will you be towing anything? Yes / No
If yes what are you towing? _____
 2. What is the total length (including towed item)? _____
 3. Will there be people riding on the item towed? Yes / No How many? _____
- *Please NO Santa Clause***

D. Animals:

1. Will there be any animals involved in your entry? Yes / No
If yes, what? _____
 2. Will there be any riders on these animals? Yes / No How many? _____
- *Please provide someone to pick up after your horse.***

E. Additional Details:

1. What type of group is it: Family, Civic Organization, Non-Profit, Business? _____
2. Purpose/Mission: What would you like the announcer to say about your group? _____

3. Does your group play music and/or perform? Yes / No

If yes what will be performed? _____

4. Is there anything else that Parks & Recreation should know about your entry? _____

Return Address: Blowing Rock Parks & Recreation

P.O. Box 47

Blowing Rock, NC 28605

Or Fax To: (828) 295-5223

Or Email To: blowingrockparade@gmail.com