



DETROIT VETERANS DAY PARADE REGISTRATION FORM



DATE OF ENTRY: _____

Group/Organization Name:

KEY CONTACT INFORMATION (ALL CORRESPONDENCE WILL BE SENT TO THIS PERSON(S))

Name:

Phone No:

Mailing Address:

Email Address:

We are: Veteran Service Organization Community Service Organization

Veteran registering individually Other:

ACCOMMODATIONS

I will need a ride Need ride with wheelchair accommodations

My organization will be able to provide a ride for those in need of one

PARADE PARTICIPANT DETAILS

PLEASE NOTE: ALL VEHICLES MUST HAVE SIGNAGE OF GROUP OR PATRIOTIC DECAL

Approx # of participants:

of vehicles with group:

List type of vehicles:

will have a float marching band youth group

will have animals if so, what type and how many?

Remarks/Special Requests:

ORGANIZATION REPRESENTATIVE RESPONSIBLE FOR GROUP

Printed Name:

Signature:

I have read and agree that (I), (my group) will abide by the liability waiver for participants and participant instructions and parade etiquette. Initials of Rep:

SUBMIT REGISTRATION FORM:

BY MAIL TO: MDVC 500 Temple Street, Suite 4M, Detroit, MI 48201

BY EMAIL TO: mdvcoffice@gmail.com

Questions or more information needed: Contact Phil Harrison, Parade Manager @ 248-909-3773 or email detroitveteransdayparade@gmail.com. Visit www.detroitveteransdayparade.org for up to date event details.