Parade Line Up: **Affton High School**
Parade Finish: **St. George Catholic Church**

For Office Use Only
Date:_____
Time:_____
Position:_____

2008 AFFTON DAYS PARADE APPLICATION

September 20, 2008 at 10:00 a.m.

_____
Organization Name

_____(_____)_____
Contact Person *Daytime Phone

_____
Mailing Address City State Zip Code

Do you prefer your confirmation by e-mail or fax? Please enter e-mail address or fax # here:

_____

Type of Entry:

☐ Entry with music
☐ Entry without music
☐ Horses (must provide own clean up)
☐ Other

Please describe entry as accurately as possible:

_____

_____

_____

Total number of vehicles_____ Total length of entry_____

Total number of persons participating in your entry_____ Number of horses_____

Submitted by: _____

Date: _____

* ***NOTE:*** *We must have a valid daytime phone number or we will mail the application back to you. In most cases, entries will be positioned in the order in which the applications are received.*

Return to: **Affton Days Parade & Festival**
10203 Gravois Road
Affton, MO 63123

On behalf of my group or organization listed above, I understand that the Affton Chamber of Commerce and the Affton Parade and Festival Committee assume no responsibility for the safety of anyone participating in the parade and that I will make certain the participants in my unit adhere to the rules and practice safe behavior, including ***only licensed drivers operating vehicles****,* ***no alcohol****, and* ***not throwing candy or objects from units****.*

_____
Signature Date