



**SOUTHPORT FIRE DEPARTMENT'S ANNUAL
LIGHT UP THE NIGHT CHRISTMAS PARADE
PARADE APPLICATION FORM**

Friday Evening, December 13, 2019

Parade Line up begins at 5pm

Parade Starts at 6:30pm

To participate, please complete this parade application and return it to the Southport Fire Department.

Mail entries to- P O Box 10608 Southport, NC 28461 or email to – Charles_drew@southportnc.org

Fire Department Officer Number – 910-457-7915

Name of Business/Organization

Address including City, State, and Zip Code

Name of Contact Person of Float or Entry

Phone Number of Contact Person

Email Address of Contact Person

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Description of Parade Entry

Entry Categories (Please select appropriate Category)

_____ Float Entry	_____ Walking Unit	_____ Classic Car	_____ Golf Cart	_____ Band	_____ Other, please explain
Please decorate all entries in Christmas Lights or Christmas theme. You may pass out tracts, flyers, candy, or literature. Please do not throw anything off of the floats or apparatus.					
Please indicate if you will be playing music or using amplified sound on your entry and give a brief description:					

The Southport Fire Department organizers reserves the right to reject or cancel any entry at any time, should it be determined that it detracts from the basic purpose of the parade and the parade spectators.

This is a family event, all parade entries is subject to approval of the organizers of this event.

Waiver of Responsibility

By participation in the Light up the Night Christmas Parade, I hereby release, discharge, and hold not liable the City of Southport or the Southport Fire Department, or any person affiliated with this event, from all claims of damages, demand actions, causes of actions, whatsoever, in part or in entirety, of any matter arising or growing out of, any participation in this event. I hereby agree to this release on my behalf, and on behalf of the total participants in my group, float, or organization. I have so informed them of this waiver of responsibility as though signed by each and every member of the float, group or organization. I also give full permission for use of my name, my group's name, and the photographs of each in connection with this event.

Signature: _____ Printed Name: _____

Title: _____ Date: _____

Organization: _____

