

OVID CARRIAGE DAYS
OVID, MICHIGAN 48866

**18TH ANNUAL OVID CARRIAGE DAYS
PARADE ENTRY FORM**
SATURDAY, SEPTEMBER 24, 2011 11:00 AM

NAME OF ORGANIZATION _____

CONTACT PERSON _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

PHONE () _____ E-MAIL _____

If you are not the contact person for your group or organization, please forward the form to the correct person.

TYPE OF ENTRY (If you fall under more than one category, please check both.)

(Queen/Float Business/Auto Politician/Auto)

___ AUTO (A) ___ BUSINESS (B) ___ CLOWN (C)

___ QUEEN/ROYALTY (Q) ___ CHURCH (CH) ___ FLOAT (F)

___ POLITICIAN (P) ___ POLICE (PE) ___ MUSIC (M)

___ TRACTOR (T) ___ WALKING (W) ___ OTHER (O)

Space needed for staging (line-up) _____ feet

DESCRIBE YOUR UNIT – THIS IS FOR THE ANNOUNCER!

Please sign and return this parade entry form, the enclosed Waiver of Liability form and a proof of liability insurance from your insurance company naming the “Village of Ovid” and “Carriage Days Committee” (covering the day of the parade only) before August 31st, 2011.

The applicant, by signing below, recognizes that participation in the parade involves some risk and takes responsibility for all action or injury that may result by participation.

Signature is required in order to participate.

**Return to: Ovid Carriage Days Parade, % Sandra Cuddy
523 Fletcher St., Owosso, MI 48867**

Home phone: 989-723-1262 Cell: 989-627-0128
Fax: 989-834-5288 e-mail: cuddysm@charter.net