

2025 COLDWATER SANTA CLAUS PARADE REGISTRATION FORM

Saturday, December 6th @ 5:30 p.m. (Please return form by Friday, November 28th)

PARTICIPANT INFORMATION

Organization/Bus	iness Name
Contact Person _	
Contact Address	
Contact Phone #	
Contact email Ad	dress
ENTRY DETAI This information in the parade:	ILS provides the organizers the information to determine positioning
TYPE OF ENT	RY VEHICLE ONLY () VEHICLE & FLOAT/TRAILER (length of trailer: ft) WALKING GROUP () TRANSPORT & TRAILER (length of trailer ft)
MUSICDOES	S YOUR ENTRY INCLUDE MUSICYES () NO ()
COMPLETED FO	ORMS CAN BE DROPPED OFF AT:
EM'S CAFE or	EMAILED TO: coldwatersantaparade@gmail.com

PLEASE DO NOT THROW CANDY (OR ANYTHING) OFF YOUR FLOAT AT THE CHILDREN WATCHING THE PARADE.

IT IS A VERY SERIOUS SAFETY HAZARD FOR THE CHILDREN.
IF YOU WISH TO GIVE OUT CANDY, PLEASE HAVE A WALKER WITH YOUR FLOAT.
YOUR COOPERATION IS APPRECIATED!!



Due to insurance requirements, we need to have the Insurance Company Name and Policy Number of the vehicle(s) driving in the parade. THIS IS MANDATORY IF YOU WISH TO PARTICIPATE IN THE PARADE.

Insurance Company Name:
Policy Number:
LIABILITY WAIVER
IN CONSIDERATION OF PERMISSION TO PARTICIPATE IN THE 2025
COLDWATER LION'S CLUB SANTA CLAUS PARADE, I DO HEREBY RELEASE
FROM LIABILITY AND HOLD HARMLESS THE COLDWATER LIONS CLUB,
THE PARADE COMMITTEE AND THE TOWNSHIP OF SEVERN AND THEIR
RESPECTIVE AGENTS. I RECOGNIZE THERE ARE INHERENT RISKS
ASSOCIATED WITH PARTICIPATION IN THIS EVENT AND CHOOSE TO
PARTICIPATE OF MY OWN FREE WILL.
NAME (print)
SIGNATURE

ORGANIZATION_____

DATE_____