



37th Annual Graceville Harvest Festival Parade Registration Form

Saturday, October 21, 2017

Line Up Beginning 9:00 am, 10:00 am Roll

Deadline for application submission – Wednesday, October 18, 2017

Name: _____ **Organization:** _____

Address: _____

Phone: _____ **E-mail:** _____

Type of Unit (Car, Float, Band, Horses, Etc.) _____

Number of 20 ft. Spaces needed: _____

Line up begins at 9:00 am and the parade rolls at 10:00 am. Each unit will pick up their number at the Campbellton Graceville Hospital parking lot. Campbellton Graceville Hospital is located at the 5429 College Drive, Graceville Florida. Festival volunteers will be there to direct you to your slot. The line up will be on Sanders Avenue beginning at the intersection of College Drive and Sanders Avenue. Parade participants will need to follow signage directing traffic down College to 12th to Ezell and back up Sanders to line up. From there the parade will travel west on Sanders Avenue to Cliff Street taking a right turn on White avenue to Brown Street. The parade will travel south on Brown Street to 2nd Avenue at which time the parade will end. All participants and observers are encouraged to join in the festival at the Factory Stores of America on Highway 77 South for arts and crafts, food, entertainment, and more. Please complete this form, sign the release indemnification form and return to City Hall, 5348 Cliff Street, Graceville, Florida 32440 or fax to (850) 263-7387 or 850-263-3072. For information call AM (850) 263-4744 or PM (850) 263-3072 or Michelle Watkins 850-263-3250.

RELEASE INDEMNIFICATION FORM

We (I) _____ agree to be responsible for and to indemnify and save the City of Graceville harmless from any and all liability, claims, damages, losses, expenses, and counsel fees whether or not the same results in whole or in part from the negligence of the City of Graceville with respect to: (a) personal injury, death, or damage to property arising out of the use, misuse, and occupancy of the used premises by occupant, its agents, employees, customers, visitors, or invitees, or (b) participants failure to perform it obligations under this agreement. We (I) also agree to be responsible for any and all damages to the occupied premises, building or and the City of Graceville caused by any act or neglect by participant, its agents, employees, customers, visitors, or invitees. I agree to all terms and conditions of this application.

Name of Authorized Representative: _____

Title: _____

Signature: _____ Date: _____

(Second Signature if needed)

Signature: _____ Date: _____

Complete Parade form, sign Release of Indemnification form and return to:

City of Graceville
P O Box 637
5348 Cliff Street
Graceville, FL 32440

For more information please contact Teresa Bush day at (850) 263-4744 night at (850) 263-3072 or Michelle Watkins (850) 263-3250. Thank you for participating in the 35th Annual Graceville Harvest Festival.