



## PARADE ENTRY REGISTRATION FORM

**WHEN:** Saturday, June 20<sup>th</sup>, 2026

Line up begins at 9:30 am. Parade commences at 10:30 am.

**WHERE:** Starting at the south end of 5<sup>th</sup> Street at Railroad Ave.

### PARTICIPANT INFORMATION:

Organization Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

### TYPE OF PARADE ENTRY

Check all that apply.

\_\_\_\_\_ Car club/motorcycle club. # participating \_\_\_\_\_

\_\_\_\_\_ Independent vehicle. Please indicated type of vehicle \_\_\_\_\_

\_\_\_\_\_ Large vehicle or equipment (fire truck, tractor, etc.) Please indicate type and how many \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Band. On foot or being pulled on trailer \_\_\_\_\_

\_\_\_\_\_ Walkers. # participating \_\_\_\_\_

\_\_\_\_\_ Pick up with trailer (example: pulling a team or organization)

\_\_\_\_\_ Float

\_\_\_\_\_ Animal. Please indicate type and # participating \_\_\_\_\_

\_\_\_\_\_ Other

Please provide brief description of parade entry including estimated length and size.

\_\_\_\_\_

\_\_\_\_\_



**WAIVER OF LIABILITY**

I agree to release, indemnify and save harmless the Town of Pilot Butte, and its elected officials, officers, employees, agents, representatives, volunteers, and other participants from and against all claims, proceedings and/or actions in respect of any costs, losses, damage or injury arising by reason of my or the dependent registrants' participation in any activities offered by the Town of Pilot Butte, or by reason of the provision of medical care by the Town to me or the dependent registrants.

**I have read and under the Waiver of Liability.**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**TOWN OF PILOT BUTTE – IMAGE RELEASE**

I hereby grant permission to be photographed during the program for memorabilia and/or promotional material. I further acknowledge that the Town of Pilot Butte are the owners of all publication materials, and that photos may be used in any exhibitions, public displays, publications, commercial art, and advertising purposes including television without limit or reservation.

**I do not agree to these terms and do not consent to having my photo taken**

First and Last Name: \_\_\_\_\_  
*(Please print)*

Signature: \_\_\_\_\_

Date: \_\_\_\_\_