



CHARLESTON CHRISTMAS PARADE

December 12, 2019

7:00 p.m. Step-Off

Name of Applicant/Organization _____

Complete Address _____

Contact Person _____

Daytime Telephone Number _____ Evening _____

E-mail _____

Provide a brief description of entry: (The description is what the emcee will announce to the spectators.)

I have read the general requirements and specifications on the attached general information sheet and certify that we will comply with same and those drivers and unit commanders will be carefully instructed as to distance to be preserved. I understand that I have a duty to have insurance on all vehicles used by my organization in the parade, and I agree to indemnify, hold harmless, and defend the City of Charleston from any claims or demands arising out of my organization's participation in the parade.

Signature of Applicant: _____ Date: _____

The Charleston Christmas Parade Committee reserves the right to reject any application.

Please send applications to:

Renee Jones – Special Events Coordinator

City of Charleston

PO Box 2749

Charleston, WV 25330

PH: 304-348-8000, ext. 104

Renee.Jones@cityofcharleston.org