



DIGNITARY ENTRY FORM

City of Auburn Veterans Parade

Saturday, November 9, 2019

This signed application must be submitted and approved prior to participation in the City of Auburn Veterans Day Parade. Complete event information will be mailed to you after the application deadline or you may visit our website for your parade line-up information and additional parade information at www.auburnwa.gov/vetsday.

Please print or type information. Application deadline is Monday, October 7, 2019.

Name of Dignitary		
Position/Title		
Organization		
Contact Person		
Mailing Address		
City	State	Zip
Day Phone	Email:	
Number of participants with dignitary _____ **One vehicle is provided for each dignitary participating in the parade, unless we are notified otherwise.**	List participants' names here:	
Please attach a bio or provide us with information about your entry. Include special recognition, awards, special interest facts or other general information. Emcee comments (used to introduce your entry/organization and may be used for publicity).		
Do you or your group plan to stay in an Auburn hotel related to participation in this event? ___Yes ___No *If yes; how many people will use hotel? _____		
LUNCHEON		
Do you have plans to attend the 1:30 p.m. luncheon?	<input type="checkbox"/> Yes (Please complete and return the luncheon form and your payment) <input type="checkbox"/> No	

PLEASE READ & SIGN

Assumption of Risks/Exculpatory Clause: For and in consideration of the opportunity to participate in the above-named activity offered by the Auburn Parks, Arts & Recreation Department, I, as evidenced by my signature below, do hereby hold harmless, release and waive all claims I may have against the City of Auburn, its officials, employees, agents, or contracted instructors, and any other person(s) involved in this activity for any and all injuries, losses, damages, or death suffered by me as a result of my participation in this activity. I accept full responsibility for the cost of treatment for any injury, losses, damages, or death suffered by me while taking part in this activity. I give permission to have my photo taken during the activity, used for publicity purposes by the Auburn Parks, Arts & Recreation Department.

Signature of Representative _____ Date _____

Submit application to:
City of Auburn Parks, Arts & Recreation Department, Attn: Veterans Parade
910 9th St SE, Auburn WA 98002-6200