

CITY OF FERRYSBURG 4TH OF JULY PARADE



PARADE APPLICATION

(Please PRINT or TYPE COMPLETELY to enable proper processing. Thanks!)

Name of Organization or Entry _____

Contact Person _____ Phone # _____

Address _____

City _____ State _____ Zip _____

Type of entry (please check one):

- | | | |
|--|---|-----------------------------------|
| <input type="checkbox"/> Antique Vehicle | <input type="checkbox"/> Fraternal/Service Club | <input type="checkbox"/> Queen(s) |
| <input type="checkbox"/> Balloons | <input type="checkbox"/> Marching Band | |
| <input type="checkbox"/> Clowns | <input type="checkbox"/> Military Unit | |
| <input type="checkbox"/> Color Guard | <input type="checkbox"/> Musical Group | |
| <input type="checkbox"/> Drum & Bugle | | |

Description of Entry: _____

If you have any questions, please contact:

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Fax # 616-844-0200
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