



APPLICATION TO MARCH IN THE PARADE SUNDAY, MAY 20, 2018

Marching Organization/Company Name: _____

Type of organization/company: _____

Schools, please indicate: Principal's Name: _____ CSD _____ School Type: _____

Address _____ City _____ State _____ Zip _____

Key Contact: _____ Phone (____) _____ Fax (____) _____

Cell Phone (____) _____ Email: _____

Secondary contact person: _____ Phone (____) _____ Fax (____) _____

Cell Phone (____) _____ Email: _____

DESCRIPTION / MISSION STATEMENT FOR ORGANIZATION (75 WORD MAX)
THIS WILL BE YOUR INTRODUCTION AND WILL BE READ PUBLICLY AS YOUR GROUP MARCHES BY THE REVIEWING STAND
PLEASE TYPE OR PRINT CLEARLY.

PLEASE FILL OUT THE FOLLOWING INFORMATION ON YOUR GROUP (WRITE N/A WHERE NOT APPLICABLE):

Total Number of Participants and/or Marchers _____
Will you have a Marching Band? _____
Will you have Color Guards? _____

How many are Children? _____
Size (in numbers) of Marching Band _____
Will you be marching With Music? _____

RETURN INSTRUCTIONS

Please **return this form no later than FRIDAY, MAY 11, 2018** to: Angel Gaud Jr., Liasion, Education and Youth Services, Office of the Bronx Borough President, 851 Grand Concourse, Room 206, Bronx, NY 10451. You can also send the application via email to agaud@bronxbp.nyc.gov or fax it to 718-590-4690.

Following receipt and approval of this application, you will receive specific instructions by email. If you have not heard from our office by **MONDAY, MAY 14, 2018**, please call 718-590-6012 for further instructions.