PRIDE Cape Coral

"PRIDE PARADE"

SATURDAY, MARCH 1, 2025 SE 47TH TERRACE, CAPE CORAL, FL Staging begins at 1:30 pm · Parade begins at 4pm *Times subject to change*

Applicant's Legal Name:			
Organization:			
City: Phone:	State:	: Zip: Email:	
Day of Contact: Phon	e:	Contact's	
Estimated Number of Participa	ints:	_	
I am entering a:			
□ Float \rightarrow How many? □ Tr	ailer → How	/ many?	
□ Motorcycle → How many?	_ □ Car/Pick	kup Truck → How many?	
(Please Note: Proof of Insuranc motorcycles, cars & trucks. Insu info@pridecapecoral.com withir	irance must l	be emailed to	
□ Marching Unit □ Step Team □	Other:		_
Will your group have live enterta	ainment, mus	usic, or a performance? □ Yes □	No
If yes, please describe:			

Note: ALL vehicles, floats & props must be NO WIDER THAN 10 FEET! All vehicles must be decorated. NO ITEMS - CANDY, NECKLACES, ETC. - MAY BE THROWN FROM MOVING VEHICLES. In participation for PRIDE Cape Coral 2025, I hereby, for myself, my heirs, executors and assigns, do waive, release, and hold the PRIDE Cape Coral and the City of Cape Coral harmless from all claims or causes of action for damages or personal injury suffered by me while participating in this event. Whether known or unknown, I understand that I am assuming the risk for any damage or injury to my property or person which I may sustain while participating in this event. If I should suffer any injury or illness, I authorize the employees and volunteers of PRIDE Cape Coral and the City of Cape Coral to use discretion to have me transported to a medical facility, and I take full responsibility for such discretionary action. I hereby authorize PRIDE Cape Coral and any of its partners or sponsors use of any photographs, videos, pictures or other material related to my participation in this event for publicity, promotion or news purposes. Organizers reserve the right to deny any application at any time, and to deny any approved applicant entry into the parade should he/she arrive after staging is complete or if entry is not properly decorated.

Signature: ______ (of applicant listed above) Date: ______