

HOLIDAY HORSE PARADE APPLICATION
(NOVEMBER 28, 2009)

ALL participants ARE TO BE DECORATED IN THE SPIRIT OF Christmas

Proof of negative Coggins & Rabies required

NAME OF Rider/Driver _____

Horse name/s _____

MAILING ADDRESS _____

PHONE NUMBER _____

EMAIL _____

Email or Snail Mail application to:

info@ellicottvillenyc.com

Ellicottville Chamber of Commerce, PO Box 456, Ellicottville, NY 14731

TYPE: Single Rider _____ GROUP _____ Driver _____

(Please check appropriate type)

NUMBER OF PARTICIPANTS: _____

DESCRIBE Entry (COSTUMES, Horse breeds, Business ETC.) _____

HOW WOULD YOU LIKE TO BE ANNOUNCED BY "THE VOICE OF ELLICOTTVILLE?"(Example:
"Nancy Smith and her horse Chaps are ready for action with their Super Elf costumes. Equine Super Heros
Unite!") _____

ATTENTION: ALL PARTICIPANTS

PLEASE READ THE FOLLOWING BEFORE YOU GET YOUR NUMBER, SIGN YOUR NAME INDICATING THAT YOU AGREE WITH EVERYTHING YOU'VE READ:

You MUST COME TO REGISTRATION TABLE TO BE ASSIGNED A NUMBER FROM 10:00am to 11:00am. GROUPS MUST BE READY TO BE PUT INTO LINE-UP 11am IF you have someone MARCHING WITH you, PLEASE INFORM REGISTRATION TABLE STAFF. FAILURE TO DO SO MAY MEAN YOU WILL NOT BE TOGETHER.

**NO TRINKETS OR CANDY WILL BE THROWN OFF INTO THE CROWD.
SOMEONE WALKING IN THE GROUP MUST PASS THEM OUT.**

ONCE YOUR GROUP IS IN LINE, IT MUST BE MAINTAINED. JUDGING OF GROUPS WILL BE DONE DURING LINE UP, COMMENCING AT 11:15am

AWARDS WILL BE GIVEN OUT AT THE GAZEBO AFTER THE PARADE. **PLEASE HAVE SOMEONE THERE FROM YOUR GROUP TO ACCEPT.** THEY WILL NOT BE MAILED TO YOU.

AWARD CATEGORIES – Most Festive Rider, Most festive Horse, Most Lights, Silliest

YOU MUST BE READY BY 11:00 A.M. AT 11:15 THE PARADE WILL BEGIN TO MOVE TO THE STAGING AREA

1. The Registrant named below, enrolled in the Ellicottville Chamber of Commerce's (hereinafter referred to as sponsor) **Holiday Horse** Parade at Ellicottville, New York is subject to the rules and regulations of the sponsor and its agents and hereby agrees to accept such rules and regulations.
2. The Registrant acknowledges that this event and related activities are HAZARDOUS activities and that he/she has made a voluntary choice to participate in those activities despite the risks that they present. In consideration of his/her being permitted to participate in the event named above, Registrant agrees to ASSUME ANY AND ALL RISKS OF INJURY OR DEATH, which might be associated with or result from his/her participating in the event.
3. Registrant has carefully read and understands this agreement and all of its terms and is over the age of 18. I understand that this acknowledgement and assumption may affect legal claims for damages in the event of my death or any injury to me. I nevertheless enter into this agreement freely and voluntarily and agree that it is binding upon heirs, my assigns, legal representatives and me.
4. The Registrant agrees that the terms of this agreement will be binding upon him or her and shall be governed by the Laws of New York State and that the terms of this document shall be admissible in evidence as a binding legal document Registrant and Owner.

Print Name _____

Signed by _____

Representing (Group Name) _____

Date _____

**All Participants are to meet at the Parking Lot
At the Ellicottville Legion
between 10:00A.M. – 11:00 A.M.**

FOR MORE INFORMATION CALL 800-349-9099