Smoky Hill Museum Street Fair Parade Entry Form

September 28, 2019

Return completed application by September 3, 2019 to:

Smoky Hill Museum, Rosa De la Cruz

PO Box 101, Salina, KS 67402-0101

## Please Type or Print

### Organization/Business Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_

Type of Entry: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Does your entry have music: ­­\_\_\_ yes \_\_\_ no

Length of Entry (Linear feet including tractor/trailer - used to determine spacing.): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Description: ❑ Bikes ❑ Horses ❑ Motorized vehicle ❑ Music ❑ Walkers

❑ Float / What will be pulling the float? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_

**Please explain your entry. We are working with Salina Media Connection (formerly Community Access TV) to broadcast this parade and the information is used by television announcers to describe your entry. Be as detailed as possible** **including the number of participants. Use extra pages as needed.**

By acceptance of this agreement, it is understood that the entrant(s) agrees:

1. to assume all risk, and release the Smoky Hill Museum/Salina Arts and Humanities Department /City of Salina from any liability for any injuries or damages to parade entries (including all persons and property) as a result of his duties under this agreement.
2. that this is a contract for services, and is not an employment contract. Smoky Hill Museum/Salina Arts and Humanities Department /City of Salina agrees to accept this contract without a certificate of insurance.
3. Being of legal age, I hereby consent that the videotapes and photographs in which I/my child appear, and /or audio recordings made of my/my child’s voice be used by the City of Salina Smoky Hill Museum, its assigns or successors. This may include print, broadcast, electronic or other media deemed appropriate by the Smoky Hill Museum and the City of Salina. Furthermore, I hereby consent that such photographs, films and recordings made shall be their property, and they shall have the right to sell, duplicate, reproduce and make use of such photographs, film recordings, tapes as they may desire free and clear of any claim whatever on my part.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date