



**PARADE APPLICATION FORM**  
**CONTACT EMAIL: STPATRICKSPARADEAC@GMAIL.COM**  
**APPLICATION DEADLINE: FEBRUARY 23RD, 2024**

**Name of Entry:** \_\_\_\_\_  
(Business or Organization Name)

**Name:** \_\_\_\_\_  
(Person to whom all materials should be directed)

**Address:** \_\_\_\_\_

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

**Phone** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Secondary Contact:** \_\_\_\_\_ **Email:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

Are you entering a vehicle? (Limit 8,600 lbs. total) Yes/No: \_\_\_\_\_

If yes, **you must** contact the City of Atlantic City for a Special Events Vehicle Permit at:

Choose from following: **501 C3** **Participating Band** **Parade Participant:** (\$100 Fee to  
**Organization** **or Marching Group** **Business or Group** **be billed)**

**Size of marching Group:** \_\_\_\_\_ **Number of buses transporting Marchers:** \_\_\_\_\_

**Will you be providing music? Yes/No:** \_\_\_\_\_

**If yes, taped or live:** \_\_\_\_\_

.....  
Please Include a Brief Biography of your Organization. Information will be used by  
the Narrator of the parade recording.

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

**Please Complete Next Page**

*This form must be completed in Adobe Reader or Adobe Acrobat to use the  
submit form button. If not using adobe, please submit forms to  
stpatricksparadeac@gmail.com*



# Participant Waiver of Liability for the Atlantic City St. Patrick's Day Parade

In consideration of the St. Patrick's Day Parade Organization granting

---

(Print Name of Participating Entity, from here out referred to as "participant")

the privilege to participate in the Atlantic City St. Patrick's Day Parade, and for other good and valuable considerations, the receipt and sufficiency thereof being hereby acknowledged. Participant hereby waives present and/or future claim for liability or damages against the City of Atlantic City, St.

Patrick's Day Parade Organization & the South Jersey Transportation Authority, its officers, directors, employees, volunteers and agents for any loss, damage or injury, whether to person or property, arising from or in connection with the parade: and releases the City of Atlantic City, the St.

Patrick's Day Parade Organization & the South Jersey Transportation Authority from any liabilities, claims, damages, cost and expenses of every kind and nature suffered or incurred by participant accompanying the parade.

Signature of Authorized Representative: \_\_\_\_\_ Date: \_\_\_\_\_

Print name of Authorized Representative: \_\_\_\_\_

*This form must be completed in Adobe Reader or Adobe Acrobat to use the submit form button. If not using Adobe or experiencing any submission issues, please save the form and submit via email to [stpatricksparadeac@gmail.com](mailto:stpatricksparadeac@gmail.com) and await for confirmation of receipt.*