

Zane's Trace Commemoration P.O Box332 Zanesville, Oh 43702

www.zanestracecommemoration.com

2023 Parade Pre-Registration Form

MUST BE SUBMITTED BY: By April 30, 2023 Form is REQUIRED to participate

Please PRINT clearly: If needed: Suppl ORGANIZATION / BUSINESS NAME		-
PRIMARY CONTACT PERSON: (REQUIRED)		
MAILING ADDRESS:	CITY	ZIP_
PHONE: (REQUIRED)	EVENING: (REQUIRED))
EMAIL REQUIRED)		
What is your Category? (Check one) □ Non-Profit Organization, School, Churc □ Public Safety Vehicle (Fire/Rescue/Am □ Car/Truck: (Historical, Show Quality o □ Motorcycle: Number of Units: □ Clowns: w/Vehicles: □Y □N Number Description of your Entry: (Check one and □ Float or Trailer: Length (ft) Pulled by: □ Semi-Truck: □ Farm Tractor: □Other:	nbulance): Number of Units: Number of Units: Number of Units: Number of walkers: d provide the requested information)	mber of Walkers:
☐ Car, Truck, Motorcycle: Year:	Make:Model	:
 □ Performing group (walking): □Band C □ Will there be a vehicle with your perform □ Will there be a Float with your perform o IF YES: COMPLETE BELOW: 	rming group: □Yes □No If yes: Type? _	
o □Float or Trailer: Length(ft): Pulled by: □Truck/SUV □Semi Truck □		
 □ Does your entry include animals? □Ye o (IF YES: Clean up must be provided in □ Types of Animal(s) 	es □No staging and parade route)	Animal(s)_
☐ Other type of Entry: (Please Describe o	on reverse side of this form)	· /-

Zane's Trace Commemoration Board Members



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Other type on entry: Continued:
DESCRIPTION OF YOUR ENTRY: Will be used for announcing
Please Note:
As a participant in the Zane's Trace Commemoration, in any capacity, you and/or your crew, hereby grant to the Zane's Trace Commemoration, Inc. (ZTC) the right to record, broadcast and otherwise exploit in any, and all media, throughout the world my participation in the event and to use my name, likeness, voice and biographical information concerning me in connection therewith. You also assume all risks associated with my participation and hereby release and hold harmless the ZTC, the sponsors of and suppliers, their respective directors, officers, employees, agents, successors and assigns and including the City of Zanesville Ohio, from and against any and all claims, damages, liabilities, costs, and expenses, including reasonable attorney's fees, arising out of your participation in the Zane's Trace Commemoration, including without limitation, any personal injuries, damage to property, which may incur as a result your, or your crews participation. You warrant that you are of legal age and/or have approval from your guardian/organization and understand the foregoing terms.
Primary Contact Signature: (Required)

Forms can be submitted by either: Mail to: Zane's Trace Commemoration, Attn: Parade: P.O. Box 332, Zanesville OH, 43701 OR By email to the Committee Chair/Co-Chair, information below. Thank you for your participation. For other questions please feel free to contact us.

Lori Burkhart Parade Committee, Chair lorib39@yahoo.com 740-260-6972

Rick Buck: Board President – 740-487-6776

Cindy Northrup: Board Secretary – 740-617-7735 Holly Tracey – Grimes: Treasurer – 740-562-7412