

# 54<sup>th</sup> ANNUAL SETTLERS' DAYS PARADE

SUNDAY, OCTOBER 12, 2025 - 2:00 p.m. Step Off

## Theme: Mardi Gras

Name of Entry \_\_\_\_\_

Address \_\_\_\_\_

Contact Person \_\_\_\_\_ Phone / Text # \_\_\_\_\_

Email \_\_\_\_\_

DOES ENTRY HAVE MUSIC? NO / YES Type/How Loud: \_\_\_\_\_

### TYPE OF ENTRY (Please Mark Only One)

**FLOAT:** \_\_\_\_\_ (Any Organization, Business, Individual)

**WALKING:** \_\_\_\_\_ Youth \_\_\_\_\_ Adults \_\_\_\_\_ Organization \_\_\_\_\_ Commercial/Industrial

**VEHICLE:** \_\_\_\_\_ Antique Vehicle (<1960) \_\_\_\_\_ Organization \_\_\_\_\_ Commercial/Industrial

**HORSE ENTRY:** \_\_\_\_\_ (Horses will be lined up at the end of the parade. Horse entries must provide clean up for horses.)

**KEEP PACE WITH THE GROUP AHEAD OF YOU!** Any group holding up the parade will be asked to step out of line.

**DESCRIBE YOUR ENTRY** (i.e., special requirements, number of marchers, number & size of vehicles. This information is necessary to determine the amount of space you require in the line-up area.)

The parade judging will begin at 2:00 PM and will be based on craftsmanship, originality, beauty, and theme.

**Throwing candy or any other objects from an entry is strictly prohibited!** You may have walkers alongside your entry handing out giveaways.

**Our reviewing stand commentators will need a brief write-up about your entry.** We will email you for comments and send your placement information approximately one week before the parade. **Please reply to that email ASAP!**

### PROOF OF INSURANCE

To participate in this year's parade, you must provide proof of insurance for your entry at least 1 week before the parade date. The Certificate Holder needs to be **Settlers' Days, Inc.** Send coverage to Marengo-Union Chamber, c/o Settlers' Days, 116 S. State Street, Marengo, IL 60152. It can also be emailed to [chamber@marengo-union.com](mailto:chamber@marengo-union.com)

### WAIVER AND RELEASE OF LIABILITY (Must be signed)

In consideration of approval of the entry as participant in the Settlers' Days Parade, the undersigned on his/her behalf and the behalf of all participants in the entry in the parade release and waive, and further agree to indemnify, hold harmless, and reimburse the Settlers' Days, Inc, the City of Marengo, Prairie Community Bank and the Marengo-Union Chamber of Commerce, as well as their respective Board of Directors, individual members, agents, employees and representatives thereof, from and against any claim which I/We, or any other person, firm or corporation may have or claim to have, known or unknown, directly or indirectly, for any losses, damages or injuries caused by my/our participation in the Settlers' Days Parade.

Authorized Signature(s): \_\_\_\_\_ Date: \_\_\_\_\_

Please complete this form and drop off or mail it to Marengo-Union Chamber, c/o Settlers' Days, 116 S. State Street, Marengo, IL 60152. Form can also be emailed to [chamber@marengo-union.com](mailto:chamber@marengo-union.com)