

**COLUMBUS DAY PARADE AND ITALIAN FESTIVAL 2009 PARTICIPANT APPLICATION**  
**Saturday, October 10, 2009**

Organization:

Business Address:

Contact Person:

Phone: (days) \_\_\_\_\_ (evenings) \_\_\_\_\_

Type of Entry: BAND \_\_\_\_\_ FLOAT \_\_\_\_\_ OTHER \_\_\_\_\_

Number of Vehicles: \_\_\_\_\_ Type of Music or Sound: \_\_\_\_\_

Number of Marchers (on foot): \_\_\_\_\_ Approx. Length of your Formation (in Feet): \_\_\_\_\_

Video Footage Available:

Still Photograph:

Other Parades your organization has participated in:

Fee, if any:

Please describe any special arrangements you would require:

Please write or attach a brief descriptive summary of your entry that you would like to be read if possible from the reviewing stand:

**Please return this completed form to:**

(1) Anna Marie Travis  
363 Bullock Road  
Slingerlands, NY 12159

OR

(2) Mr. Steven T. Longo  
Columbus Parade and Festival  
200 South Pearl Street  
Albany, New York 12202