



Parade Guest Participation Application

Guest Parade Participation Fee Based on Individual Parade

****Must be paid in full before participating in parade and attend the Krewe meeting prior to specified parade****

****All guests must be at least 21 years of age****

Date _____ Participating In (List Parades) _____

Guest Invited by Krewe Members (1) _____ (2) _____

Name _____

Home Address _____

City _____ State _____ Zip _____

Home Phone (____) _____ Cell Phone (____) _____

E-mail Address _____

Place of Birth _____ Date of Birth _____

Marital Status (Circle) Married Single Widowed Divorced

If married, Spouse's Name _____

Children's Name(s) / Ages _____ / _____

_____ / _____

_____ / _____

_____ / _____

Are you related to a Krewe member through marriage or blood? (Circle one) Yes or No

If so, please give name(s) of Krewe member(s) & relationship _____

Have you ever been arrested? (Circle one) Yes or No

****Please do not attempt to conceal any arrest or conviction****

If ever arrested for any reason & found guilty, state location, date, substance of arrest, & the final outcome.



I, _____, understand that the Spirit of Cigar City Krewe is a private organization and that my participation in any parade(s) or event(s) is by invitation only and with prior approval of the Krewe Founders and Executive Officers. I understand and agree to complete a parade guest participation application, have said application approved by the Krewe Founders and Executive Officers and to attend the Krewe meeting prior to the parade(s) or event(s) that I will be attending. I further understand that the sponsoring Krewe member(s), _____, will be responsible for my conduct and costumes.

It is the intent of the Spirit of Cigar City Krewe to have an enjoyable time at all events, while maintaining an image that is respected by event spectators, sponsors and law enforcement officers. I understand and agree that no guest of the Spirit of Cigar City Krewe, regardless of rank or position, shall conduct themselves in any manner unbecoming a Krewe member or guest and/or that could reasonably bring harm, discredit, shame, embarrassment or public ridicule upon the Spirit of Cigar City Krewe. I understand and agree that my sponsoring Krewe member(s) are responsible for and shall be subject to sanctions and/or disciplinary procedures should my conduct bring harm, discredit, shame, embarrassment or public ridicule to the Krewe. I also understand that any violations of parade conduct and/or costume violations are subject to disciplinary procedures.

In the event that an invited guest of a Spirit of Cigar City Krewe member at a Krewe event, violates the provisions listed above, I understand and agree that any person may submit a written complaint against myself and my sponsoring Krewe member(s). I understand that all complaints, regardless of rank or position, will be given the upmost attention. I further understand and agree that should my sponsoring Krewe member be found to have violated any of the Krewe rules, regulations or guidelines, the Krewe Founders and Executive Officers reserve the right to terminate their membership with a majority vote and without refund of any dues.

Guest Signature

Date

Sponsoring Krewe Member Signature

Date



Waiver and Release Agreement

Waiver and release agreement from liability hereby releases, waives, discharges and conveys not to sue the Spirit of Cigar City Krewe, their respective administrators, founders, officers, directors, board members, members, representatives, hosts, other participants, operators, officials, and any person involved in the Krewe, sponsors, advertisers, owners, and lessees or premises used to conduct the event and each of them, their officers and employees, all for the purpose herein referred to as "releasees", from all liability to the undersigned.

Hereby agree to indemnify and save and hold harmless the releasees and each of them from any loss, liability, damage or cost they may incur due to the presence of the undersigned in or upon the area or in any way observing, or working for or for any purpose participating in any event, sanctioned, authorized, sponsored or promoted by releasees and whether caused by the negligence of the releasees or otherwise.

Hereby assumes full responsibility for and risk of bodily injury, death or property damage due to the negligence of releasees or otherwise while in or upon the area and/or while officiating, observing, or working for or for any purpose participating in any event, sanctioned, authorized, sponsored or promoted by releasees.

Each of the undersigned further expressly agrees that the forgoing release, waiver, indemnity agreement is intended to be as broad and as inclusive as is permitted by the law of the Providence or State in which the event is conducted and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. In the event that I sustain injury or illness while participating, I hereby authorize any emergency first aid, medication, medical treatment or surgery deemed necessary by licensed medical personnel. I also give my permission for attending medical personnel to execute on my behalf my permission forms or other necessary medical documents and to act in my behalf if I am not immediately available to do so.

Undersigned has read and voluntarily signs the waiver and release agreement of liability and indemnity agreement, and further agrees that no oral representatives, statements or inducements part from the foregoing written agreement have been made. This waiver, release and indemnification agreement specifically embraces each and every event sanctioned, authorized, sponsored or promoted by said releasees during the entire membership year, and each continued membership year including, without limitation, local or regional events, wherever located, and applies to each and every event and activity, and has the same effect as if effectively released and indemnified as to each and every event sanctioned, authorized, sponsored or promoted by releasees.

Signature

Printed Name

Date