

Holden's Parade of Lights Entry Form

Circle your entry category below:

ORGANIZATION BUSINESS HOLDEN RESIDENT

Circle your vehicle category below:

FLOAT TRUCK JEEP

Group Name:

Contact Name:

Contact Email:

Contact Phone Number:

Any Additional Comments:

LIST ALL PARTICIPANTS IN GROUP

Group name: _____

Contact name: _____

Phone number: _____

Quantity in Group: _____

Participant's names: (Print Clearly)

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

8. _____

9. _____

10. _____

11. _____

12. _____