



**The Foliage Sertoma Club
Of Apopka**



The City of Apopka

Annual Christmas Parade Entry Form
“Miracle on Park Avenue”
Saturday, December 13, 2025

1) Organizations mailing address:

Name: _____

Address: _____

Email: _____

2) # 1 Contact Person _____

Cell: _____

Email: _____

2 Contact Person _____

Cell: _____

Email: _____

3) Entry: Please check one:

Band ()

Float ()

Other ()

Bands or performing groups **are given 1 minute to perform in front** of our judges. Any additional time will deduct points from your overall score.

4) This must be completed in full. Your staging area will be determined by the Information you provide.

Entry Size and Description:

Width Length

Towing Vehicle _____

Trailer _____

Total Size of Entry _____

The following information will be used during the parade as your entry passes the viewing stand and for the media commentators. In less than 50 words, explain your organization and your entry.

Entry form must be signed **below.**

I do hereby release and hold harmless the Foliage Sertoma Club of Apopka, Inc. and the City of Apopka, of any and all manner of action, suits, damages, or claims whatsoever arising from any loss or damage to my property. I have read and understand the rules and requirements set forth by the Foliage Sertoma Club of Apopka Parade Committee. I agree to abide by these rules and requirements if allowed to participate in the Foliage Sertoma Club/City of Apopka Christmas Parade.

Enclosed is my check for either **\$75.00 for For-Profit or \$50.00 for Non-Profit** with my application. Checks are made payable to **“Foliage Sertoma Club of Apopka”**. (Payments may be made via PayPal at FoliageSertoma.org.)

Signature of Authorized Person

Date

Mail Application and Check to:
OR Email: forevrbzy60@gmail.com
And pay fee at foliagesertoma.org

Foliage Sertoma Club of Apopka
P.O. Box 718
Apopka, FL 32704

For questions or more info call Parade Chairperson: Lorena Potter 407-583-7349