**Key West Chamber of Commerce**

Fantasy Fest Parade Local Award Application Rider

Send Completed form to:

Email: [membership@keywestchamber.org](mailto:membership@keywestchamber.org)

Fax: 305-294-7806

**Contact Information**

|  |  |
| --- | --- |
| Contact Name\* |  |
| Name of Float\* |  |
| Street Address |  |
| City, State, Zip |  |
| Home Phone |  |
| Cell Phone |  |
| E-Mail Address |  |

\*Please use the same information as used on your official Fantasy Fest entry.

**Eligibility**

Summarize your local eligibility through example by employment history, property or business ownership, residency in Monroe County, Etc.

**Rules & Regulations**

1. The undersigned acknowledges that this document is a rider to the official Fantasy Fest Parade application. All participants must be registered and approved through the Official Fantasy Fest Parade Application process. This requires adherence to the official Fantasy Fest rules and regulations regarding float participation.
2. The Key West Chamber of Commerce (KWCC) reserves the right, at its sole discretion, to award participants and subjectively determine local eligibility for this contest. Local eligibility will be defined as residency, employment, business ownership and/ or property ownership within Monroe County or the incorporated municipalities of Monroe County. The award levels are $7,500 for the best overall local float participant and $2,500 for the runner up local float participant and $1,000 for walking entry.
3. In consideration of participation in Fantasy Fest and all its attendant activities (the "Event"), I, the undersigned, on behalf of myself and all of my employees and/or volunteers participating in the Fantasy Fest parade, hereby release and forever discharge the (KWCC), its directors, employees, members, etc. and causes of action whatsoever against the (KWCC) arising out of or related in any way to any property damage, personal injury, including death, or any other loss, damage or injury sustained by the undersigned as a result of participation by the undersigned and/or employees and/or volunteers in the event.

**Agreement and Signature**

By submitting this contest application, I affirm that I am a local resident of Monroe County, Florida and I agree to conform to the rules and regulations of this contest as stated on page two of this application.

|  |  |
| --- | --- |
| Name (printed) |  |
| Signature |  |
| Date |  |