



YORKTOWN WESTERN DAYS ASSOCIATION, INC.

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41st YORKTOWN WESTERN DAYS CHILDREN'S PARADE

THEME – **“Classic Cartoon Mania”**

DATE - Friday, October 15, 2021

TIME - 5:30 P. M.

PLACE - Main Street

AGES - 3 years through 12 years – **Must be 3 years old by October 5, 2021**

proudly sponsored by

Elizabeth Burda

Please consider joining us for the 41st Annual Western Days Children's Parade. One of Yorktown Western Days biggest traditions.

The Parade will start at Finch Funeral Home parking lot and finish at the Fire Station. Be in the vicinity of Finch Funeral parking lot for **judging which will begin promptly at 4:45 P.M. through 5:15 P.M. Please be in line and ready by this time.** Please fill out the entry form and come join the fun! **Free T-shirts to participants who turn in their entry & release form before September 29,2021. No guarantee on sizes and availability after deadline.**

PRIZES FOR: Most Creative: Single Walking, Group Walking, Single Float & Group Float, Most Comical: Single Walking, Group Walking, Single Float & Group Float, Best Over-all Float & Best Over-all Walking. **Please note-NO POWER-WHEELS (for safety reasons we will not allow these due to battery failure because of length of parade, no exceptions). NO motorized entries like mini-bikes, riding lawnmowers, or go-carts will be allowed. NO pets! NO Glass Items or Bottles Allowed! Bicycles, scooters, homemade float platforms, wagons or simply walking are encouraged. No gory entries.**

YORKTOWN WESTERN DAYS CHILDREN'S PARADE ENTRY FORM *One entry form per group, please!*

Child's Name _____ Age ____ Child's Name _____ Age ____
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 Child's Name _____ Age ____ Child's Name _____ Age ____
 Single Walking _____ Group Walking _____ Single Float _____ Group Float _____

I give permission for my child to participate in the Western Days-Children's Parade. I agree to indemnify and hold harmless the Yorktown Western Days Association, Inc., Yorktown Chamber of Commerce & Ag., Inc., Yorktown Economic Development Corporation, the City of Yorktown and any/all sponsoring organizations, advisors, chaperones, volunteers and release them of all liabilities. If a medical emergency arises, I hereby give my permission to place my child under the care of a doctor and/or hospital for medical treatment. ***(MUST Include signature of each parent with participating child and name of child)***

Please check T-shirt size: **(t-shirt guaranteed if entry form returned by September 29, 2021)**

Youth X-Small ____ Youth Small _____ Youth Medium _____ Youth Large _____ Adult Small _____ Adult Medium _____

Signature-Parent/Guardian _____ Date _____
 Signature-Parent/Guardian _____ Date _____
 Signature-Parent/Guardian _____ Date _____
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Adult Shirt Sizes available for an additional \$10 each and turned in and paid by September 25, 2020. Please check Sizes and Quantity
 Small _____ Medium _____ Large _____ XL _____ 2XL((add\$2.50) _____ 3X((add\$2.50) _____

Please include contact number if ordering extra shirts _____