

CITY OF BAY MINETTE SPECIAL EVENTS/PARADE DRIVERS AND WALKERS' INFORMATION



SPONSORING ORGANIZATION: _____

EVENT: _____

EVENT DATE: _____

DRIVER AND VEHICLE INFORMATION *PRINT CLEARLY*

Name of Driver: _____

Driver's License Number: _____

Vehicle Make: _____ Vehicle Model: _____

Insurance Company and Policy Number of Driver: _____

Registration/License Plate: _____

By signing this Waiver Form, a participant self-identifying as a driver acknowledges that the City will confirm the current validity of both the identified driver's license and the identified registration/license plate and may confirm the current status of the identified insurance policy.

Signature of Driver: _____ Date: _____

WALKERS FOR VEHICLE/TRAILER *PRINT CLEARLY*

Must have one (1) Walker for each Wheel of Vehicle and Trailer

1. _____

6. _____

2. _____

7. _____

3. _____

8. _____

4. _____

9. _____

5. _____

10. _____