

The 44th Annual Best of the Bluegrass Festival of the Horse presents

GEORGETOWN COMMUNITY HOSPITAL THE COLT AND FILLY PARADE Children's Parade Entry Form

Theme: "Stars of the Bluegrass - Whatever Shines Bright in the State of Kentucky" We want to see your very best bright shining stars with whatever means the most to you here in the bluegrass!

Friday, September 5, 2025 at 6:30 p.m.

Please complete the application and Assumption of Risk form below and mail to: Festival of the Horse P.O. Box 676, Georgetown or Fax to 863-2561 or Email to: gtownhorsefestival@gmail.com

All fields below are required and must be legible for consideration.

Organization/Com	npany:						
Contact Name:							
Address:							
City:		State:		Zip:			
Phone: Em			mail Address:				
Please Check the appropriate boxes below:							
Youth (under	r 18)	Adult	Float Unit				
Marching Unit		it '	Vehicle(s) Only Unit				

Horse Units are encouraged to participate in the Grand Parade of Horses on Saturday, Sept. 6th.





Assumption of Risk Form (Required):

<u>ATTENTION</u>: PLEASE KEEP OUR PARADE SAFE BY FOLLOWING THE RULES BELOW:

- 1. Theme and Child Orientation: All entries must be on a theme, including children, or be child-oriented.
- 2. Signage Guidelines: Organizations are welcome and encouraged to display signs representing their group. Again, please remember that this parade is intended for a family audience. Entries without signage clearly identifying the name of the organization represented will not be judged.
- 3. Flyers and Pamphlets: Flyers, pamphlets, etc., are NOT permitted.
- 4. Candy Passing: Candy passing is allowed, but candy throwing is NOT. Please supervise those who are handling the candy.
- 5. Float Safety: No one may get off their float or stand on floats anytime during the parade. NO EXCEPTIONS! All floats must have adult walkers alongside to ensure the safety of those onboard.
- 6. Horse Units: No Horse Units are allowed to participate in the Colt & Filly Review Children's Parade. All horse units should and are encouraged to participate in Saturday night's Grand Parade of Horse, an all-horse parade.

ALL ENTRIES ARE JUDGED AND MUST BE DECORATED WITH IDENTIFYING SIGNAGE.

APPLICATIONS CAN BE PICKED UP AND DROPPED OFF AT THE GEORGETOWN/SCOTT COUNTY TOURISM OFFICE.

399 OUTLET CENTER DRIVE, GEORGETOWN, KY 40324

PRIZES!!!!

AWARDS ARE BASED ON CREATIVITY, ORIGINALITY, & INTERPRETATION OF THEME.

BEST THEME ENTRY BEST FLOAT ENTRY

2025 Assumption of Risk, Release of Liability and Indemnification Form Colt and Filly Review

In consideration of being permitted to take part in the Festival of the Horse, Applicant does hereby voluntarily assume all risks associated with participation in the Festival of the Horse and related activities, whether known, unknown, or reasonably foreseeable, including the risk of injury, illness, damage, loss, death, and economic harm. Applicant also does hereby release, covenant not to sue, and forever discharge Georgetown/Scott County Tourism Commission, Festival of the Horse Committee, Celebrate Georgetown, the City of Georgetown, Kentucky, the Georgetown Woman's Club, Georgetown-Scott County Parks and Recreation and their officers, members, agents and employees, and all sponsoring organizations and their directors, employees, sponsors, agents and volunteers (the "Released Parties"), from any and all claims, liabilities, losses, damages, expenses, accidents and occurrences (including attorney fees) arising out of, or in connection with the performance of the Festival of the Horse Participation Agreement, activities associated with the Festival or arising out of Applicant(s) participation in the Festival of the Horse. Applicant does further agree to indemnify, defend, and hold each of the Released Parties harmless from and against any and all such claims, liabilities, losses, damages, expenses, accidents and occurrences. Parents and guardians must sign for any child under the age of 18 years old who wishes to participate in the Festival of the Horse.

Festival of the Horse, Inc. reserves the right to photograph any and all entries for future publications.

Participants Name:	Age:	Date:
Signature:		
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Guardian/Parent Name:	Date:	
Signature:		

**Group leader may assume responsibility for the entire group. All safety information should be relayed to all participating members of your party.