Florida Memorial University will be taking over Miami Gardens for our 2017 Pride Nation Homecoming Parade! It is time for us to celebrate another year of family, power, and pride and we want you to be a part of our #PrideNation! This year’s Homecoming week will be **February 5th - 11th**. The parade will be held on **Saturday, February 11th** beginning at Miami Carol City Senior High School. Line-up for all participants will begin at 7:30 a.m. and the parade will start promptly at 9:30 a.m.

**Location/Direction of the Parade:**

The parade will start at Miami Carol City Senior High School located at 3301 Miami Gardens Drive, Miami Gardens, FL 33056. Make a left onto 42nd Avenue and continue south until we reach Florida Memorial University at 15800 NW 42nd Avenue, Miami Gardens, FL 33054.

<table>
<thead>
<tr>
<th>Each of the following is considered one (1) entry for the parade *price is per 1 vehicle</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Florida Memorial University entries (Students Clubs/Organizations, Departments, and Schools)</td>
</tr>
<tr>
<td>☐ Marching Band</td>
</tr>
<tr>
<td>☐ Float and primary towing vehicle</td>
</tr>
<tr>
<td>☐ Walking elements (maximum of 25 people)</td>
</tr>
<tr>
<td>☐ Car/Van/Motorcycle elements (maximum of four vehicles) Per vehicle</td>
</tr>
</tbody>
</table>

Floats, cars, flatbeds, and trucks must be appropriately decorated. At a minimum, entries will have a sign located on the front and sides of the vehicle identifying its activity. Vehicles that are not appropriately decorated will **NOT** be allowed to participate in the parade.

Deadline for submission of your application is **Friday, February 3, 2017 by 5:00 p.m.** You will **not** be confirmed as participants until applicable fee is made payable to Florida Memorial University and your application is submitted to Dr. Abigail C. Mobley-Bellinger, Homecoming Parade Chair.

**Registration Fee Payment**

Please pay applicable fees to April Smith located in the Alumni Affairs Office. We accept cash, money orders and debit/credit cards with a Master card or Visa logo. **NO PERSONAL CHECKS** will be accepted. You will be given a receipt that should be attached to your completed application when submitted to Dr. Abigail C. Mobley-Bellinger, Parade Committee Chair. **DO NOT SUBMIT YOUR APPLICATION WITHOUT THE PROPER RECEIPT FROM APRIL SMITH.**

**Office of Dr. Abigail C. Mobley-Bellinger:**

15800 NW 42nd Avenue, Miami Gardens, FL 33054

FMU Wellness Center #114

If there are any further questions, please contact the Dr. Abigail C. Mobley-Bellinger at (305) 626-3179 or abmobley@fmuniv.edu. Thank you in advance for your cooperation and assistance.

Let’s make this the GREATEST Florida Memorial University Homecoming Parade EVER!!!
December 1, 2016

To Whom It May Concern,

Florida Memorial University will be taking over Miami Gardens for our 2017 Pride Nation Homecoming Parade! It is time for us to celebrate another year of family, power, and pride and we want you to be a part of our #PrideNation! This year’s Homecoming week will be February 5th - 11th. The parade will be held on Saturday, February 11th beginning at Miami Carol City Senior High School. Line-up for all participants will begin at 7:30 a.m. and the parade will start promptly at 9:30 a.m.

This year’s parade is guaranteed to be a major part of the Homecoming 2017 festivities and you would NOT want to miss it!

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Deadline for submission of your application is Friday, February 3, 2017 by 5:00 p.m. You will not be confirmed as a participant until the applicable fee is made payable to Florida Memorial University and your application is submitted to Dr. Abigail C. Mobley-Bellinger, Homecoming Parade Chair.

Registration Fee Payment

Please pay applicable fees to April Smith located in the Alumni Affairs Office. We accept cash, money orders and debit/credit cards with a Master card or Visa logo. NO PERSONAL CHECKS will be accepted. You will be given a receipt that should be attached to your completed application when submitted to Dr. Abigail C. Mobley-Bellinger, Parade Committee Chair. DO NOT SUBMIT YOUR APPLICATION WITHOUT THE PROPER RECEIPT FROM APRIL SMITH.

Office of Dr. Abigail C. Mobley-Bellinger:
15800 NW 42nd Avenue, Miami Gardens, FL 33054
FMU Wellness Center #114

Application Submission

The attached application must be completed and returned to Dr. Abigail C. Mobley-Bellinger along with the required cashier’s receipt from the Bursar’s Office for fee payment and proof of liability insurance for motorized entries, and parade application.

Floats, cars, flatbeds, and trucks must be appropriately decorated. At a minimum, entries will have a sign located on the front and sides of the vehicle identifying its activity. Vehicles that are not appropriately decorated will NOT be allowed to participate in the parade.

If there are any further questions, please contact the Dr. Abigail C. Mobley-Bellinger at (305) 626-3179 or abmobley@fmuniv.edu. Thank you in advance for your cooperation and assistance.

In the Lion Spirit,
Abigail C. Mobley-Bellinger, Ph. D.
Chair, Homecoming Parade
All participants entering the parade must complete and submit this application for processing. For large groups, floats are preferable to cars. Your float and towing vehicle is considered one vehicle. Floats, cars, flatbeds, and trucks must be appropriately decorated.

Application deadline is Friday, February 3, 2017 by 5:00 p.m. Please pay applicable fees to April Smith located at 15800 NW 42nd Avenue, Miami Gardens, FL 33054 Alumni Affairs Office. We accept cash, money orders and debit/credit cards with a Master card or Visa logo. NO PERSONAL CHECKS will be accepted. You will be given a receipt that should be attached to your completed application when submitted to Dr. Abigail C. Mobley-Bellinger, Parade Committee Chair. DO NOT SUBMIT YOUR APPLICATION WITHOUT THE PROPER RECEIPT FROM APRIL SMITH.

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Participants will be issued a PARADE PASS approximately one week prior to the parade. You will not be allowed to enter into the parade without a pass. NO EXCEPTIONS! Along with the pass, you will receive a parade information sheet that will contain staging information for the start of the parade. The parade will be held on Saturday, February 11, 2017. Line-up for all participants will begin at 7:30 a.m. and the parade will start promptly at 9:30 a.m.

THE PARADE COMMITTEE RESERVES THE RIGHT TO EXCLUDE ANY PARTICIPANT ENTRY THAT IS DEEMED INAPPROPRIATE OR UNSUITABLE.

NAME OF UNIT/ORGANIZATION: (print clearly)

NUMBER OF PARTICIPANTS: ________________________________

TYPE UNIT: _____ Walking _____ Marching Band _____ Car/Van/Other _____ Float _____ Flatbed

AFFILIATION: _____ Faculty _____ Staff _____ Student _____ Alumni _____ Student Organization _____ University Vendor _____ Community Partner _____ Other (explain)

______________________________________________________________

CONTACT NAME: ____________________________________________

PHONE: ___________________________________________________

ADDRESS: _________________________________________________

CITY & STATE: ________________________________________________

ZIP CODE: ___________________ EMAIL: (print clearly) ________________

ALTERNATE CONTACT: _______________________________________

PHONE: ___________________________________________________

EMAIL: ___________________________________________________
FLORIDA MEMORIAL UNIVERSITY PRIDE NATION HOMECOMING 2017 PARADE WAIVER

In consideration of my voluntary participation in the 2017 Homecoming Parade (Activity), I, the participant, do hereby agree to assume any and all liability for, but not limited to, any accident, harm, illness, damage or loss including suffering and death that may occur to me in any manner, as a result of my voluntary participation in the 2016 Homecoming Parade. I further state that I fully understand and appreciate the dangers, hazards, and risks inherent in this physically challenging activity and knowingly accept them in consideration of being permitted to participate in the activity.

By signing this form, I understand the intent thereof, and I agree to accept liability for, but no limited to any accidents, harm, illnesses, injuries, damages or losses, including suffering and death that may occur to me or property, as a result of my participation in the above Activity. I understand that Florida Memorial University, the Florida Memorial University Board of Trustees, and the Florida Memorial University Cabinet and their officers, employees, and agents [Releases], will not be liable for any accidents, illness, injury, damages, or loss including suffering and death, which may occur as a result of my participation in the above Activity.

I further agree to release, forever discharge, covenant not to sue, indemnify. Save and hold harmless, jointly and severally, releases, from and against any and all liability, actions, causes of actions, liens, claims, premiums demands, losses, damages, settlements, costs and expenses (including attorney’s fees and court costs) of any nature arising out or connected with this Activity and my participation in the Activity. Furthermore, I agree to assume the responsibility of providing a defense for the releases if any litigation arises out of participant’s involvement in the Activities.

In signing this Release, I acknowledge and represent that I am fully informed of the content of the Release of liability and hold harmless agreement by reading it before signing it and that I have reviewed it and understand what it means and that I sign this document as my free act and deed. No oral representations, statements, or inducements, apart from the forgoing written statement, have been made.

I further state that I am fully competent to sign this Agreement; and that I execute this release for full, adequate and complete consideration fully intending for myself and my spouse, family, estate heirs, executors, administrators, personal representatives or assigns to be bound by the same and will indemnify the releases for any suit brought by the named parties. No oral representations, statements or inducements apart from the statements herein have been made.

I further agree that this Release shall be construed in accordance with the laws of the State of Florida. If any term or provision of this Release shall be held illegal, unenforceable or in conflict with any law governing this Release, the validity of the remaining portions shall not be affected thereby.

Date: ____________________________

Participant’s Signature: ________________________________________________________________

Signature of Parent/Guardian of minor (persons under age of 18)

Witness Name (Print): ________________________________________________________________

Witness Name (Sign): ________________________________________________________________

Return to:
Florida Memorial University
ATTN: Dr. Abigail C. Mobley-Bellinger
15800 NW 42nd Avenue, FMU Wellness Center # 114
Miami Gardens, FL 33054