

PLEASE RETURN THIS FORM TO:

QUEENS COUNTY PARADE COMMITTEE  
PO. BOX 82  
ROCKAWAY BEACH,  
N.Y. 11693  
WWW.QUEENSCOUNTYPARADE.ORG

OR

**MICHAEL BENN**  
181 BEACH 112<sup>TH</sup> STREET  
ROCKAWAY  
**N.Y. 11694**

NAME OF UNIT \_\_\_\_\_

NAME OF PRESIDENT/CORR. SECRETARY \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_ TYPE OF UNIT \_\_\_\_\_

(CHECK ONE)    ( ) COMPETITIVE                      ( ) NON-COMPETITIVE

NUMBER IN LINE \_\_\_\_\_ (BANDS ONLY) FEE \$ \_\_\_\_\_  
NEGOTIABLE

BRIEF HISTORY OF UNIT FOR PUBLICITY \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

COMMENTS/QUESTIONS: \_\_\_\_\_

\_\_\_\_\_

NOTE: POSITION IN THE LINE OF MARCH IS DETERMINED BY THE DATE  
RESPONSE IS RECEIVED BY THE COMMITTEE..