



## Parade Participation / Fashion Show

NAME OF PARTICIPANTS : \_\_\_\_\_

CULTURE REPRESENTING: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_

CONTACT PHONE: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

PLEASE GIVE SHORT DESCRIPTION OF PRESENTATION (OR ATTACH BIO):

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NUMBER OF PARTICIPANTS IN YOUR GROUP: \_\_\_\_\_

**PARTICIPATING IN: FASHION SHOW Y / N**

ONLY (2) members will be allowed on stage for fashion show.

**PLEASE SUBMIT APPLICATION TO:** [info@tracychamber.org](mailto:info@tracychamber.org) or fax: (209) 833-9526

**TRACY CHAMBER OF COMMERCE**  
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Tracy Ca 95376  
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