

Board of Directors

Ms. Andreia Costa President

Mrs. Michelle S. Afonso Mrs. Manuela Matos Co-Vice Presidents

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Mrs. Jacqueline E. Castanheira Pageant Coordinator

> Ms. Jennifer Costa Parade Coordinator

Mr. Manny Grova Jr. Golf Outing Coordinator

Mrs. Carla Rodrigues Da Silva Immediate Past President

> Monsignor Joao Antão Honorary Pastor

> > Padre Nuno Rocha

Affiliate Organizations:

P.I.S.C. of Elizabeth P.I.S.C. Nova Geração P.I.S.C. Nova Mocidade Rancho Danças e Cantares de Portugal Escola Amadeu Correia Our Lady of Fatima Parish Our Lady of Fatima Youth Group Knights of Columbus Our Lady of Fatima Girl Scouts Our Lady of Fatima Boy Scouts Elizabeth Portuguese Lions Club Elizabeth Portuguese Leo Club Asso. Regional Caldense Beneficiencia Algarvia Asso. Portuguesa de Desportos Elizabeth Youth Soccer Portuguese American Police Association

Portugal Day Committee

Elizabeth, New Jersey

P.O. Box 6738, Elizabeth, New Jersey 07206-6738 ***** Tel: (908) 894-8277 info@ElizabethPortugalDay.com ***** www.ElizabethPortugalDay.com

Portugal Day Parade 2017 Contingent Participation Application

*** EVERY ORGANIZATION WANTING TO PARTICIPATE MUST COMPLETE THIS APPLICATION TO BE INCLUDED IN THE PARADE LINE UP***

Organization/ Cont	ingent Name:			_	
Contact Name:				_	
Contact Information	n	D M I			
Phone Number:		Fax Numb	er:		
		I			
E-mail Address:					
Organization Addr	ace.				
Organization Audit	Street				
	City,	State	Zip Code		
DESCRIBE YOUR CONTINGENT:					
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	į CIII	ECRALL IIIAI AI	l L1j		
	Float				
	Walking/Marchers (Estimate number of walking in parade contingent:)				
	Open Car (License Plate No.:)				
	Band				
	D.J.				

*YOU WILL BE CONTACTED BY A MEMBER OF THE COMMITTEE WITH SPECIFIC DETAILS ON WHERE YOUR CONTIGENT IS TO ASSEMBLE FOR THE PARADE.

Return this Sheet by Friday, May 19, 2017

e-mail to: contingents@elizabethportugalday.com

fax to: (908) 354-9095

or mail to: Portugal Day Committee

Other (Please Describe:

P.O. Box 6738

Elizabeth, New Jersey 07206



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PARADE ANNOUNCEMENT FORM

LEASE WRITE INFORMATION EAXCTLY AS YOUR ORGANIZATION IS TO READ AT THE REVIEWING STAND

GROUP NAME:

	GROUP # [TO BE COMPLETED IN BY COMMITTEE]
1	*** PLEASE NOTE THE FOLLOWING INFORMATION*** PLEASE WRITE INFORMATION EXACTLY AS YOU WOULD WANT THE MASTER OF CEREMONIES TO ANNOUNCE YOUR ORGANIZATION. PLEASE BE SURE TO INCLUDE GENERAL AND IMPORTANT INFORMATION [I.E. BEGINNING DATE OF ORGANIZATION, PURPOSE, HISTORY, ETC.]
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