



# Portugal Day Committee

Elizabeth, New Jersey

P.O. Box 6738, Elizabeth, New Jersey 07202-6738 ❖ Tel: (908) 337-1497  
info@ElizabethPortugalDay.com ❖ www.ElizabethPortugalDay.com

1978 – 2024

## Portugal Day Parade 2024

### Contingent Participation Application

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

#### Board of Directors

Mrs. Michelle Afonso  
*President*

Mr. Sergio Granados  
Mrs. Maria M. Matos  
Mrs. Carla Rodrigues Da Silva  
*Co-Vice Presidents*

Mrs. Jennifer Ramalho  
Ms. Nancy Dionisio  
*Co-Secretaries*

Mrs. Jennifer DaSilva Costa  
Mrs. Maria Almeida  
*Co-Treasurers*

Mr. Nicholas Almeida  
Mrs. Maria Z. Carvalho  
*Co-Public Relations*

Mrs. Jacqueline E. Castanheira  
*Pageant Coordinator*

Mrs. Melissa Sintra Costa  
*Parade Coordinator*

Mr. Manny Grova Jr.  
*Golf Outing Coordinator*

Mrs. Isabel Bastos  
*Cultural Exhibition Coordinator*

Mr. Jorge Da Costa  
*Immediate Past President*

Father Nuno Rocha  
*Pastor*

**Organization/ Contingent Name:** \_\_\_\_\_

**Contact Name:** \_\_\_\_\_

Contact Information	
Phone Number:	Fax Number:

**E-mail Address:** \_\_\_\_\_

**Organization Address:** \_\_\_\_\_  
*Street*  
\_\_\_\_\_  
*City, State Zip Code*

### DESCRIBE YOUR CONTINGENT:

*[CHECK ALL THAT APPLY]*

- \_\_\_\_ Float
- \_\_\_\_ Walking/Marchers (Estimate number of walking in parade contingent: \_\_\_\_\_)
- \_\_\_\_ Open Car (License Plate No.: \_\_\_\_\_)
- \_\_\_\_ Band
- \_\_\_\_ D.J.
- \_\_\_\_ Other (Please Describe: \_\_\_\_\_)

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

#### Affiliate Organizations:

*P.I.S.C. of Elizabeth  
P.I.S.C. Nova Mocidade  
Rancho Danças e Cantares de Portugal  
Escola Amadeu Correia  
Our Lady of Fatima Parish  
Elizabeth Portuguese Lions Club  
Elizabeth Youth Soccer  
Portuguese American Police Association  
Portuguese American Government Association  
Beneficencia Algarvia*

**Return this Sheet by Friday, May 24, 2024**

**e-mail to: contingents@elizabethportugalday.com**

**fax to: (908) 354-9095**

**or mail to: Portugal Day Committee**

**P.O. Box 6738**

**Elizabeth, New Jersey 07206**



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# PARADE ANNOUNCEMENT FORM

GROUP # \_\_\_\_\_

[TO BE COMPLETED IN BY COMMITTEE]

\*\*\* 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.]

**GROUP NAME:** \_\_\_\_\_

**YEAR ESTABLISHED/FOUNDED:** \_\_\_\_\_

**PRESIDENT NAME:** \_\_\_\_\_

**3 IMPORTANT FACTS ABOUT YOUR  
ORGANIZATION YOU WANT ANNOUNCED:**

1. \_\_\_\_\_

\_\_\_\_\_

2. \_\_\_\_\_

\_\_\_\_\_

3. \_\_\_\_\_

\_\_\_\_\_



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## 2024 Elizabeth Portugal Day Parade Participant Authorization Injury Waiver & General Release Form

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As the person retrieving the parade lineup instructional packet I do hereby certify that I am an authorized Agent of my Organization, and as such have full authority to sign this Authorization, waiver and release. As a participant in the Portugal Day Parade, Elizabeth, NJ I acknowledge that participation in the Events exposes me and my organization to a possible risk of personal injury. I hereby release Portugal Day, Inc., and its officers, directors, employees, agents, licensees, subsidiaries, consultants, independent contractors and affiliates (collectively, the "Company"), and any Sponsors (as hereinafter defined) of the Events, from any and all liability from property damage, personal injuries or other claims arising from or in connection with my participation in the Events including claims that are known and unknown, foreseen and unforeseen, future or contingent. I have been advised by Portugal Day, Inc. that we have a right to obtain, and we should have, our own insurance for this event to protect and indemnify us. For good and adequate consideration, the receipt of which is hereby acknowledged, I hereby grant, release, quitclaim and irrevocably release to the Company and the Company's sponsors of the Event, the right and authority (but not the obligation) in perpetuity throughout the world, in all media, now or hereafter known, to use, sell, reproduce, and distribute (in any manner they deem appropriate, and without limitation), quoted material, biographical information, my actual or fictitious name, my photograph, likeness, recorded voice or videotaped filmed appearances obtained in connection with the Events (the "Materials"), to use in connection with a Grantee's programs, products and promotional and advertising purposes as the Grantee, in its sole discretion, will deem appropriate. I waive any rights of privacy and/or publicity that I might otherwise have with regard to the use and display of the Materials and any derivative work of the Materials. No use of my name, voice and or likeness shall be the basis of any future claim of any kind against any Grantee, or its agents, licensees, successors and assigns, and I hereby release the Grantees from any and all claims, liabilities or damages arising out the rights granted hereunder, or the exercise thereof. I covenant that I will not now or at any time in the future, directly or indirectly, commence or prosecute any action, suit or other proceeding against the Company and/or its Sponsors, arising out of or relating to the actions, cause of action, claims and demands hereby waived, released or discharged by me. I acknowledge that I have read and fully understand this Player Authorization, Injury Waiver and Release Form. This agreement will be binding on me personally, my organization listed below, any and all members of that organization participating in this event, my and their spouse, children, legal representatives, heirs, successors and assigns.

**Please print:**

**DATE:** \_\_\_\_\_

**ORGANIZATION NAME:** \_\_\_\_\_

**AUTHORIZED AGENT:** \_\_\_\_\_

**AGENT SIGNATURE:** \_\_\_\_\_

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**THIS FORM MUST BE COMPLETED BY EACH PARTICIPATING CONTINGENT AND  
SUBMITTED TO THE PDC COMMITTEE PRIOR TO PARADE DAY. PLEASE E-MAIL  
FORM TO CONTINGENTS@ELIZABETHPORTUGALDAY.COM**