



Pigotts Mall, Redcliffe Street,
P.O.Box 1650, St. John's, Antigua
T: 1.268.462.0194 462.4707 F: 1.268.462.9286
E: abfestivals@ab.gov.ag
www.abfestivals.com



**NATIONAL FESTIVALS OFFICE
APPLICATION FOR BUSINESS FLOATS:
(TO BE COMPLETED IN DUPLICATE)**

NAME OF COMPANY _____

TYPE OF BUSINESS: _____

ADDRESS: _____

COMPANY REPRESENTATIVE; _____

EMAIL ADDRESS; _____

CONTACT NUMBERS: _____ (H) _____ (W) _____ (C)

THEME OF FLOAT _____

DESCRIPTION OF FLOAT _____

BUILDER OF FLOAT: _____

I HEREBY ATTEST AND DECLARE:

- 1. THAT THE AFOREMENTIONED IS TRUE AND CORRECT AND I AM TO PROMPTLY SUBMIT SATISFACTORY PROOFS OF THE ABOVE.**
- 2. THAT I HAVE NOT ENTERED INTO ANY AGREEMENT THAT PROHIBITS MY FLOAT FROM SUCCESSFULLY MAKING THIS APPLICATION.**
- 3. I HAVE READ AND AGREED TO THE TERMS AND CONDITIONS.**
- 4. I HAVE RECEIVED ALL RULES AND CRITERIA WHICH ARE APPLICABLE TO THE COMPETITION.**

I ALSO UNDERSTAND THAT THE NATIONAL FESTIVALS OFFICE RESERVES THE RIGHT TO REFUSE MY APPLICATION AND THAT ANY FALSE OR MISREPRESENTATION I HAVE MADE IS SUFFICIENT GROUNDS FOR MY DISQUALIFICATION FROM THIS COMPETITION.

SIGNATURE OF LEADER

DD / MO / YR
DATE:

.....**FOR OFFICIAL USE ONLY**.....

RECEIVED ON BEHALF OF ABFC: _____
SIGNATURE

DD / MO / YR
DATE

