

2025 The St. Patrick's Parade Committee of Jefferson

REQUIRED COVERAGE FOR ST. PATRICK'S PARADE COMMITTEE OF JEFFERSON, INC.
\$1,000,000 Each Occurrence with an Aggregate of \$3,000,000 for Bodily Injury and Property Damage
\$25,000 AD&D Accident Medical Included

- | | | |
|---|--------------|--------------------------|
| 1.) Super Float (21-50 Riders) | \$825 | <input type="checkbox"/> |
| 2.) Regular Float (13-20 Riders) | \$795 | <input type="checkbox"/> |
| 3.) Standard Float (6-12 Riders) | \$560 | <input type="checkbox"/> |
| 4.) Mini Float (1-5 Riders) | \$385 | <input type="checkbox"/> |
| 5.) Marching Groups | \$210 | <input type="checkbox"/> |
| 6.) Any Pick-Ups/Trailers (Comfort Stations)
Used with Marching Groups (NO Passengers) | \$210 | <input type="checkbox"/> |
| 7.) Any Convertibles / SUV's / Other Vehicles (Passengers) | \$210 | <input type="checkbox"/> |

Total Premium Due for Coverages: _____

I understand that to receive a refund, cancellations must be made by the listed Lieutenant, in writing, by the Friday BEFORE the Parade date. I also understand that any cancellation requests by email or voicemail must be confirmed by Arceri & Associates, and that unless requested otherwise, refunds for requested cancellations will be sent by mail to the address of the Lieutenant listed on the application. I also understand that there will be a \$10 processing fee for all cancellations for refund, and that there is no refund on late fees.

(Signed by a representative of the Group)

Name of Group: _____ E-mail: _____

Group Lieutenant's Name: _____ Phone #: _____

Address: _____ City: _____ ZIP: _____

Truck Pulling Float/Truck Float:

Truck/Tractor Owner: _____ Phone #: _____

Driver: _____ Phone #: _____

Float/Flatbed:

Float/Flatbed Trailer Owner: _____ Phone #: _____

Checks or Money Orders should be made payable and remitted to:

Arceri & Associates

2017 Transcontinental Drive | Metairie, LA 70001
504.484.6393

No checks accepted after the FINAL meeting

\$20 NSF Fee on returned checks.

Office Use ONLY:

Check: # _____ Money Order: # _____ Other: _____

Certificate: E-mailed / Given / Mailed: ____ / ____ / ____

Line Up # _____