

Ware 250th Anniversary Gala Parade

Vehicle Registration

Group/Marching Unit _____

Vehicle Owners Name _____

Vehicle Registration _____

Vehicle Insurance _____

Vehicle Driver's name _____

Vehicle Driver's License # _____ State _____

Vehicle Description _____

Please attach a copy of registration for the vehicle and a copy of driver's license

With this completed form to: ware250parade@hotmail.com

Or mail to:

Carol Zins
156 Pleasant Street
Ware, MA 01082

Or Fax to: 413-525-8951 Attn: Jill