

Will you be attending Gilman Dairy Days Parade?

Yes _____ No _____

Name/Organization _____

Address _____

City/state/zip _____

Phone _____

Names of Queens or info for announcing purposes:

What kind of unit & how many will you be bringing?

Queen/float _____

Marching unit _____

Car _____

Truck _____

Float _____

Other _____

Mail completed form to:

Cheryl Rosemeyer

765 E Mill St.

Gilman, WI 54433