HILL CITY
HEART OF THE BLACK HILLS

Hill City Area Chamber of Commerce Olde Tyme Christmas Lighted Parade

Hill City's Olde Tyme Christmas Parade - November 27, 2026 6pm

------ Line-up begins 5pm, all entrants must be in place by 5:45 pm – Parade starts 6pm sharp -----

PARADE LINE UP on MUSEUM DRIVE, STAFF WILL DIRECT YOU. PARADE ROUTE: MUSEUM DRIVE SOUTH TO MAIN STREET THROUGH TO LIGHT AT INTERSECTION JUNCTION US Hwy 16/385 & MAIN ST.

ALL ENTRY FORMS MUST BE RECEIVED ON OR BEFORE **MONDAY, NOVEMBER 23rd.**

INDIVIDUAL/BUSINESS/ORGANIZATION NAME: _____

CONTACT PERSON: _____

CELL PHONE (REQUIRED): _____

EMAIL ADDRESS (REQUIRED): _____

MAILING ADDRESS (REQUIRED): _____

Approx. FLOAT DIMENSIONS (esp. length): _____ **Number of vehicles**: _____

 # OF WALKERS: _____ OTHER INFORMATION: _____

MUSIC WITH YOUR ENTRY? Yes____ No_____

Mark the category that best describes your entry:

Community/Non-profit ____ Commercial/Business ____ Band ____ Antique/Classic Auto ___

Military/Veterans, etc. ____ Equestrian *(Must provide own clean up)* ____ Other_____

DESCRIBE HOW YOU WILL DECORATE YOUR ENTRY : _____

NOTE: IF YOU ARE A GROUP, SUCH AS A CAR CLUB OR HAVE MULTIPLE PEOPLE ON YOUR FLOAT—EVERYONE MUST GATHER AS A GROUP or BE ON YOUR FLOAT FIRST PRIOR TO LINING-UP ON MUSEUM DRIVE; LATE ARRIVALS will not be able to join the group during staging on Museum Drive.

PARTICIPATION IN Hill City's Olde Tyme Christmas Parade is subject to the following stipulations and regulations:

- **ALL PARADE PARTICIPANTS ARE REQUIRED TO PROVIDE A CERTIFICATE OF GENERAL LIABILITY or PROOF OF GENERAL AUTO LIABILITY INSURANCE ALONG WITH THIS COMPLETED APPLICATION.**
- **To ensure the safety of parade spectators, NO candy, prizes, promotional items, etc. shall be thrown from any moving or stationary parade float or vehicle along the parade route**. Any such items must be handed out by walkers. Please ensure your parade entry is sufficiently staffed if you intend to distribute candy/items and ensure walkers distribute them completely clear of the line of traffic and away from the float such that spectators do not have to enter roadway to retrieve them.
- Each parade participating group must be responsible not only for their safety but must also take precautions to ensure the safety of their float and its participants. An adult or adults must be on all floats where there are children.
- Each float/truck/motor vehicle or ATV driver is solely responsible for the safe operation of their vehicle, each driver must be the holder of a valid driver's license and must have valid auto liability coverage in force. A float/truck/vehicle or ATV driver must stay with the float/entry/vehicle at all times, including when in/at the staging area.
- Animals participating in the parade must have a temperament for handling noise and excitement. Entrants with animals of any kind are responsible for immediately curbing/cleaning up after their animals and safely controlling their animals at all times.
- Drugs and alcohol are not permitted on any parade entry before or during the parade, and shall not be consumed by any participant on parade route.
- Parade participants shall not spray liquids of any kind at or into the crowd.
- IN CASE OF EMERGENCY, which may require sheriff or fire vehicles, all entries are required to move to the far right.

INDEMNIFICATION:

Participant expressly assumes all risks incident to or in connection with participation in the event. Participant agrees to and shall indemnify, defend and hold the Hill City Area Chamber of Commerce and City of Hill City harmless from and against all losses, liabilities, damages, costs, expenses, judgments or settlements whatsoever incurred by the Hill City Area Chamber of Commerce or City of Hill City resulting from any claim, demand, action, cause of action or suit arising from or relating to the negligent or intentional acts of omissions of participant, or its volunteers, employees and others acting on behalf of, or for the benefit of, participant.

As a participant or representative of a participating group, I have read and understand the above stipulations and indemnification and will inform all members of my participating group with regard to stipulations and indemnification requirements.

Signature of Participant or Participant Group Representative:_____

Date: _____ **Cell Phone:**_____

RETURN FORM TO: PO BOX 253, Hill City, SD 57745 Phone: 605-574-2368 / director@hillcitysd.com or assist@hillcitysd.com