

MEDINAH - PARADE OR APPEARANCE FORM

Present to the Director of Parade Units who will sign copies and send them to the Potentate, Parade Marshal and Parade Units.

To: Noble John Wojciechowski
Director of Units and Fraternal Committees
307 McKool Ave Romeoville IL 60446
Cell: 331-212-1293

It is imperative this form is sent to John "Wojo" Wojciechowski at least ten days prior to parade date.

Fill out completely and send to
Email: sausageman2@aol.com

PRINT or TYPE
From Unit or Shrine Club:

Permission is requested to participate in:
Type of Function:

Parade or Appearance Place and Date

This appearance is to be made without cost to Medinah Temple.

"I hereby certify that I have filed my current liability insurance coverage with Medinah Temple and my motor vehicle liability insurance coverage meets or exceeds the minimum amount (\$300,000 csl) of insurance protection required by Medinah Temple."

Submitted by:

_____ Title: _____ Date: _____

YOUR EMAIL ADDRESS _____ Phone # _____

Appearance (is) (is not) approved:

Director of Parade Units _____ Date: _____

Potentate _____ Date: _____

Revised March 2020

MEDINAH -PARADE OR APPEARANCE FORM FOR NON-SHRINERS

(a) Shriners Only. Notwithstanding the provisions in §335.11 of the international bylaws, in parades of temples at annual sessions of Shriners International, or in local Shriners parades or exhibitions under the auspices of temples or Shrine associations, only Nobles shall participate.

(b) Civic Parades. In civic parades, Nobles, their ladies and children may participate, with the approval of the potentate, so long as their ladies and children participate only as passengers in non-performing, non-competing vehicles with no less than four wheels.

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Director of Units and Fraternal Committees
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Fill out completely and send to
Email: sausageman2@aol.com

Permission is requested to participate in:

PRINT or TYPE

From Unit or Shrine Club: _____

Parade Place Date/Time _____

Name / Relation _____

"I hereby certify that I have filed my current liability insurance coverage with Medinah Temple and my motor vehicle liability insurance coverage meets or exceeds the minimum amount (\$300,000 csl) of insurance protection required by Medinah Temple."

This appearance is to be made without cost to Medinah Temple. Submitted by:

_____ Title: _____ Date: _____

YOUR EMAIL ADDRESS _____ Phone # _____

Appearance (is) (is not) approved:

Director of Parade Units _____ Date: _____

Potentate _____ Date: _____

Revised March 2020