



**Port Clinton Lighted Community Christmas Parade**  
**Saturday, December 6, 2025 at 5:30pm**  
**UNIT Registration Form**  
**Unit Registration Ends: November 28, 2025**

**Guidelines:**

- Each parade unit must register on a separate registration form.
- Each form **MUST** be accompanied by a **brief description/commentary** that will be read by our announcer. Commentaries should include information about your float, your organization, and/or upcoming events. You may use the back of this sheet to write out your commentary.
- A parade unit consists of one of the following: **one group of marchers**, OR **one vehicle**, OR **one float**.
- All vehicles **must be decorated and lighted**.
- Due to safety concerns, **no firing of guns or cannons will be allowed in the parade**.
- **Registration Fee: FREE**

**Confirmation and Instructions:**

Detailed instructions regarding line-up time, unit number, and bay assignment will be **emailed to the contact person listed below**.

If you do not receive your confirmation and instructions by **Friday, December 5th**, please call 419-734-5503

**IMPORTANT NOTE:** Units are **NOT** placed in the same order that registrations are received. Unit numbers, line-up times and Bay assignments are not determined until the **entire registration process** is completed.

**Placement requests cannot be guaranteed, but will be honored to the best of our ability.**

**Parade Unit Info:**

**Title of your Parade Unit:**

**Name of your Group, Organization, or Company :**

**Contact Person:**

**Mailing Address:**

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

*(If an email address is provided, a registration confirmation email will be sent)*

Type of Unit (check all that apply): Float \_\_\_\_ Vehicle \_\_\_\_ Marchers \_\_\_\_ Animals \_\_\_\_ (list type of animal)

Do you have music? Yes \_\_\_\_ No \_\_\_\_

**Remember! A brief commentary of your parade unit is REQUIRED to be submitted WITH this form!**  
(you may use the back of this sheet) No commentary changes will be permitted after form submission.

**Please return this completed form, by November 28th to:**

Main Street Port Clinton, 110 Madison Street, Port Clinton, OH 43452  
or return it in person at the Main Street Port Clinton office, or fax it to us at 419-734-4768

**Main Street PC reserves the right to select which units and information will be included in any broadcast.**

For more information, contact us by phone 419-734-5503,  
by email [info@historicportclinton.com](mailto:info@historicportclinton.com), or by stopping in to see us at 110 Madison Street.