MARDI GRAS 2022 REGISTRATION FORM

SPECIAL SEATING AREA

RETURN NO LATER THAN FRIDAY, FEBRUARY 25, 2022

PLEASE PRINT:		
NAME OF ORGANIZATION:		
ADDRESS:		
CITY	STATE	ZIP
CONTACT PERSON:		
PHONE #:		
E-MAIL ADDRESS:		
NUMBER OF CLIENTS:		
(IF APPLICABLE)		
WHEELCHAIR CLIENTS:		
PARKING PASSES NEEDED:		
VAN:	CAR:	
TOTAL:	BUS:	
AS SOON AS I FORM IS RECEIVED, PARKING PA	ASS/ES WILL BE MAILED IF APPROVE	D.
PLEASE MAIL FORMS TO:		
CITY OF BILOXI		
ATTN: ROB STEWART/CHERYL BELL		
P. O. BOX 775		

BILOXI, MS. 39533

EMAIL: rstewart@biloxi.ms.us or cbell@biloxi.ms.us