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**ANTIGUA BARBUDA FESTIVALS COMMISSION  
 2020 APPLICATION FOR BUSINESS FLOATS:  
 (TO BE COMPLETED IN DUPLICATE)**

NAME OF COMPANY \_\_\_\_\_

TYPE OF BUSINESS: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

COMPANY REPRESENTATIVE; \_\_\_\_\_

EMAIL ADDRESS; \_\_\_\_\_

CONTACT NUMBERS: \_\_\_\_\_ (H) \_\_\_\_\_ (W) \_\_\_\_\_ (C)

THEME OF FLOAT \_\_\_\_\_

DESCRIPTION OF FLOAT \_\_\_\_\_

BUILDER OF FLOAT: \_\_\_\_\_

**I HEREBY ATTEST AND DECLARE:**

- 1. THAT THE AFOREMENTIONED IS TRUE AND CORRECT AND I AM TO PROMPTLY SUBMIT SATISFACTORY PROOFS OF THE ABOVE.**
- 2. THAT I HAVE NOT ENTERED INTO ANY AGREEMENT THAT PROHIBITS MY FLOAT FROM SUCCESSFULLY MAKING THIS APPLICATION.**
- 3. I HAVE READ AND AGREED TO THE TERMS AND CONDITIONS.**
- 4. I HAVE RECEIVED ALL RULES AND CRITERIA WHICH ARE APPLICABLE TO THE COMPETITION.**

**I ALSO UNDERSTAND THAT THE NATIONAL FESTIVALS OFFICE RESERVES THE RIGHT TO REFUSE MY APPLICATION AND THAT ANY FALSE OR MISREPRESENTATION I HAVE MADE IS SUFFICIENT GROUNDS FOR MY DISQUALIFICATION FROM THIS COMPETITION.**

\_\_\_\_\_  
 SIGNATURE OF LEADER

DD / MO / YR  
 DATE:

.....**FOR OFFICIAL USE ONLY**.....

RECEIVED ON BEHALF OF ABFC: \_\_\_\_\_

SIGNATURE

DD / MO / YR

DATE

