



76th Annual Swamp Buggy Parade

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Bob Smith

William Stalker

Mark Creel

Parade Committee

Steve Reidy, Chairman

Mark Creel, Chairman

Brandy Callahan, Staff

Charlotte Billger, Volunteer

Dear Parade Participant,

It is time for our long standing Naples, FL. tradition, the annual Swamp Buggy Parade. On behalf of the all Volunteer Board of Directors, we invite you to join us on Saturday, January 25, 2025 in beautiful downtown Naples. This years theme is:

“Red, White and Blue”

This will be a spectacular event! It would not be complete without you marching alongside us down US 41, starting at Fleishmann Blvd. and continuing to 5th Ave. South.

We look forward to seeing you, your friends and family participate in this one of a kind event. Following the parade on Sunday, January 26, 2025 the Winter Classic Swamp Buggy Races will take place at The Florida Sports Park.

If you have any questions, please feel free to contact our office at 239-774-2701 or by email to sbifsp@gmail.com.

Sincerely,
Steve Reidy and Mark Creel
Parade Chairman



2025 Parade Theme:
Red, White and Blue!

PARADE ENTRY FORM Saturday, January 25, 2025

Check In- 8:30 a.m. Start 10:00 a.m.

ENTRY NAME: _____

CONTACT PERSON: _____ EMAIL _____

BUSINESS PHONE: _____ CELL PHONE: _____ FAX _____

MAILING ADDRESS: _____ ZIP: _____

SPONSOR (If Any): _____

DESCRIPTION OF ENTRY: _____

If this is a group entry, is there more than one (1) vehicle/unit? Yes _____ No _____ How Many _____

Briefly describe the dimensions. Height _____ Length _____ Width _____

Number of adults _____ Number of children under 6 _____

Float/ Vehicle Driver:: _____

Float Riders: _____

ENTRY FEES: (Please check one)

Which category(s) do you want to be judged in?

- Political (per vehicle)\$500.00
- Commercial or Individual (per vehicle)\$100.00
- Civic Organizations..... No Charge
- Non-Profit Organizations No Charge
- Racing Buggies & Woods Buggies No Charge

- Best Theme Entry **PLEASE NOTE:**
- Best Youth Entry **This is not a political event. No**
- Grand Marshals Choice **Political signs are allowed on any**
- Most Impressive Woods Buggy **entry, Only Political entries that**
- Most Impressive Racing Buggy **have paid the appropriate fee.**
- Most Creative Political Entry **Thank You.**

NOTE: The sale of products or fundraising of any kind shall not be conducted by any individuals or groups along the parade route while participating in the parade. ****PLEASE NOTE: spotter walking along each side of parade entry is required if there are any blind spots or are handing out candy.**

MUSIC (choose one): We will supply our own music _____ We want to be near music _____
We want to be away from music _____ Does not matter _____

PLEASE: All entries must be received by January 13, 2025, 5pm. EMAIL: SBIFSP@GMAIL.COM

Signature _____ Date: _____

NOTE: All entries will be evaluated by the Parade Committee prior to the date of the parade for compliance with the parade rules. The Parade Committee reserves the right to reject any application from participation based upon non-compliance with the parade requirements and regulations. We cannot guarantee parade positions. Participants will be notified by telephone. **DRIVER OF ENTRY MUST PROVIDE COPY OF VALID DRIVER'S LICENSE ALONG WITH THIS APPLICATION.**

ALL ENTRY FEE'S MUST BE PAID AT ONCE BY DRIVER/OWNER OF SAID ENTRY

Swamp Buggy Inc.
P.O. Box 10528
Naples, Florida 34101
Email: sbifsp@gmail.com

Received By: _____ Date: _____
Total Entry Fee Paid: \$100 \$500
Method of Payment: Check Check #: _____ Visa MC AMEX

Credit Card Payment Form

Application Type

- Parade Political \$500.00
 Parade Commercial \$100.00

Name: _____

Phone: _____

Email: _____

Credit Card Authorization Form

Please complete all fields. You may cancel this authorization at any time by contacting us. This authorization will remain in effect until cancelled.

Credit Card Information	
Card Type:	<input type="checkbox"/> MasterCard <input type="checkbox"/> VISA <input type="checkbox"/> Discover <input type="checkbox"/> AMEX <input type="checkbox"/> Other _____
Cardholder Name (as shown on card):	_____
Card Number:	_____
Expiration Date (mm/yy):	_____ CVV _____
Cardholder ZIP Code (from credit card billing address):	_____

I, _____, authorize _____ to charge my credit card above for agreed upon purchases. I understand that my information will be saved to file for future transactions on my account.

Customer Signature

Date