SARNIA KINSMENPARADE 2026

DEC 5 2026

FLOAT VECHICLE[S] CHECKLIST

ENTRY_____

COMPANY_____

1st DRIVER_____

INSURANCE_____

2nd DRIVER_____

INSURANCE_____

3rd DRIVER_____

INSURANCE_____

4th DRIVER_____

INSURANCE_____

5th DRIVER_____

INSURANCE_____

ALL MOTORIZED VECHICLE CHECKLIST PER VECHICLE

- **FLOAT: REGISTERED ORGANIZATION**
- **COMPANY: PRIVATE/BUSINESS**
- **DRIVER: OPERATOR NAMWE**
- **INSURANCE: INSURER COMPANY NAME AND POLICY NUMBER**