



*42<sup>nd</sup> Annual*  
**MLK Day Parade** Band Participation Form

# \_\_\_\_\_

Name of Band: \_\_\_\_\_

Name of Director(s): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_ Zip Code: \_\_\_\_\_

Office: \_\_\_\_\_ Fax: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_

School/Band website: Email: \_\_\_\_\_

# of Band Members \_\_\_\_\_  
 # of Majorettes \_\_\_\_\_  
 # of Flag Bearers \_\_\_\_\_  
 # of Drill Team Members \_\_\_\_\_  
 # of Other Marchers \_\_\_\_\_  
**# of Total Participants:** \_\_\_\_\_

**RELEASE OF LIABILITY:**

I hereby release and hold harmless the Dr. Martin Luther King Parade & Festivities Committee, Inc., of all damage, theft, and personal injury that may occur to or as a result of any parade participant before, during, and after the parade.

\_\_\_\_\_  
 Name of Band

\_\_\_\_\_  
 Signature of Band Director or School Principal

**Return this completed participation form with an organization résumé by **December 31, 2018** to P.O. Box 380358 - Miami, FL 33238**

**MLK Office** (open 11/1/18): **African Heritage Cultural Arts Center:** 6161 NW 22nd Ave., Miami, FL 33142 **(305) 857-8246**  
 Information Contacts: Ms. Gigi Tinsley (786) 470-7334 Mrs. Alexis Willis (305) 746-9695 Ms. Cheryal Frazier White (305) 335-6241

**FOR OFFICE USE ONLY:**

Date Received: \_\_\_\_\_ Date Paid: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Check #: \_\_\_\_\_

**Dr. Martin Luther King Jr. Parade & Festivities Committee, Inc.**

P.O. Box 380358 - Miami, FL 33238 - (305) 606-2995 - info@mlkparadeandfestivities.org - www.mlkparadeandfestivities.org