



43rd 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 January 15, 2020 to :

MLK Office (open 11/1/19): **Haynes Security Services: 7900 NW 27th Ave. #E-239, Miami, FL 33147**
 Information Contact: **Ladi Jenkins (305) 606-2995**

FOR OFFICE USE ONLY:

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

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

12864 Biscayne Blvd. #436 ▪ North Miami, FL 33181 ▪ (305) 606-2995 ▪ info@mlkparadeandfestivities.org ▪ www.mlkparadeandfestivities.org