



**Dr. Martin Luther King Celebration Committee
Of
St. Johns County, Inc.
Post Office Box 1586
St Augustine, Florida, 32085-1586**

2018 AFFILIATION APPLICATION

**Martin Luther King Celebration Committee
Affiliate Membership**

RE: Request for Affiliation for a business or Non Profit organization.

_____ (affiliate) would like to be considered to be an affiliate member to assist in celebrating the birthday of Dr Martin Luther King , Jr. As an affiliate member we understand that we will be able to advertise our business for one (1) year at the various functions of the Committee in keeping with the rules and regulations of the Committee.

Name of Organization _____

Name of Officer _____

Signature _____

Date _____

******* Committee to fill In below *******

Date Approved For: _____ (good for one year only)

Approving Officer: _____