



## KING TEAM

### *Member Application*

Applications must be completed by the King Team member and submitted to the King Team Leader.  
Leaders return all applications to the Martin Luther King Jr. Commission, 101 East Capitol Avenue, Little Rock, AR 72201.

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone:(Home) \_\_\_\_\_ (Message) \_\_\_\_\_

School Name: \_\_\_\_\_

School Organizations: \_\_\_\_\_

Special Skills, Interests, Hobbies: \_\_\_\_\_

Community Involvement: *(List all community projects in which you are involved.)*

On the lines below please *briefly* explain why you want to be on the King Team.

The above information is true and correct to the best of my knowledge. I understand that giving false information may cause me not be eligible to serve on the King Team.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Parental Consent: (If Applicant is 18 or older, parents do not have to complete.) I have read the above information and believe it to be true to the best of my knowledge and do hereby offer my consent.

Signature \_\_\_\_\_ Date \_\_\_\_\_