



**CITY OF DORAL**  
**PROCLAMATION, CERTIFICATE AND KEY TO THE CITY**  
**REQUEST FORM**  
**OFFICE OF THE CITY CLERK**

**Request for: Certificate \_\_\_\_\_ Proclamation \_\_\_\_\_ Key \_\_\_\_\_ (check one)**

*Certificates which are inclusive of any other similar type of recognition, are honorary documents issued by the Mayor that may be used to honor special events or individuals. These may include but are not limited to the citizens and businesses of the City of Doral, as well as certain organizations' occasions of importance and significance to the City of Doral. Certificates are not automatically renewed and are limited to one (1) recipient per event, per calendar year.*

*Proclamations are ceremonial documents that recognize, celebrate, and honor extraordinary achievements. These may include but are not limited to the citizens of the City of Doral; residents of Miami-Dade County, certain organizations' occasions of importance and significance; days that are noteworthy or historically significant; and/or special events. Proclamations will not be issued for matters of political controversy; ideological or religious beliefs or individual conviction; campaigns or events contrary to City policies espousing hatred, violence, or racism. Proclamations are strictly honorary, and they are issued as a courtesy. In addition, they are not legally binding and do not constitute an endorsement by the City of Doral.*

*The Key to the City is an honor bestowed upon esteemed residents, visitors, and others whom the City wishes to honor. A key to the City is strictly honorary.*

**Date of Request:** \_\_\_\_\_

**Name of Requestor:** \_\_\_\_\_

**Organization:** \_\_\_\_\_

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

**Phone / E-Mail:** \_\_\_\_\_

**Name of Individual / Organization to be honored:**  
\_\_\_\_\_

**Title for Proclamation (if applicable):** \_\_\_\_\_  
\_\_\_\_\_

**Certificate Type:**

\_\_\_\_\_ **Congratulatory**

\_\_\_\_\_ **Anniversary**

\_\_\_\_\_ **Grand Opening (Ribbon Cutting)**

\_\_\_\_\_ **Letter of Recognition**



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**Reason for Recognition (Please attach 4 – 6 “whereas clauses” as draft text for a Proclamation, or justification for certificate):**

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**Date and Time of Recognition:** \_\_\_\_\_

**Document is to be:**

- Presented at Protocol / Council Meeting: \_\_\_\_\_ (date)
- Presented at the following event: \_\_\_\_\_

*(Please provide event location information)*

- Picked up by: \_\_\_\_\_
- Mailed to: \_\_\_\_\_

**Note: Submission of a request for a Proclamation, Certificate or Key to the City does not guarantee issuance.**

**Administrative Use Only**

Approved: Yes \_\_\_\_\_ No \_\_\_\_\_ If no, state reason: \_\_\_\_\_

Approved Date: \_\_\_\_\_