



Grand Krewe de Libertalia

A Krewe with A New Point of View!



Confidential New Member Application

I hereby apply for membership in the **Grand Krewe de Libertalia, Inc.** and agree, if elected, to abide by the By-laws of the Organization and at all times to work for the betterment of the Organization. I agree to pay for such initiation fees and assessments as may be required for my membership classification as indicated below:

- Regular \$475.00 annual dues + \$25.00 non-refundable application fee
- Spousal \$275.00 annual dues + \$25.00 non-refundable application fee
- Out-Of-State \$300.00 annual dues + \$25.00 non-refundable application fee

(Note: The Grand Krewe's fiscal year runs from July 1st to June 30th. Membership dues are due at the start of the fiscal year.) Please include a check made payable to: **Grand Krewe de Libertalia, P.O. Box 21562, Tampa, FL 33622-21562**

Name: _____

Home Address: _____

Home Phone: _____ Home Fax: _____

Home E-mail Address: _____

Business Name: _____

Business Address: _____

Business Phone: _____ Business Fax: _____

Business E-mail Address: _____

Spouse Name: _____ Mail Preference: Home Business

Date of Birth: _____ Occupation: _____

Civic, social or fraternal organizations: _____

Hobbies/interests: _____

Reason(s) for your interest in the Grand Krewe: _____

Children (if any): _____

All new members are required to be active on at least one committee during their first year of membership. Select one:

- Scholarships/Community Involvement By-laws Float/Parades
- Membership/Website Social Events/Refreshments

Sponsored for Membership by: _____

Signature of Applicant: _____ Date: _____

Thank you for your interest in the Grand Krewe de Libertalia. The Membership Committee will be contacting you.

Office Use:	Check No.: _____	Waiver: <input type="checkbox"/>
	Amount: _____	Directory: <input type="checkbox"/>
	Date Received: ____ / ____ / ____	Date Accepted: ____ / ____ / ____