



# The Mystic Krewe of Avalon

## Membership Application

<input type="checkbox"/> New Member
<input type="checkbox"/> Returning Member
<input type="checkbox"/> Renewal

Sponsored by (member name): \_\_\_\_\_ Date: \_\_\_\_\_

Last name: \_\_\_\_\_ First name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ e-mail: \_\_\_\_\_

Country: \_\_\_\_\_ Date of birth: \_\_\_\_\_ Sex:  M  F, T-Shirt size \_\_\_\_\_

### Employment:

Company Name: \_\_\_\_\_ Phone: \_\_\_\_\_ ext: \_\_\_\_\_

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

Title: \_\_\_\_\_ email: \_\_\_\_\_

Type of Business: \_\_\_\_\_

<u>Dues:</u>	<u>Amount Enclosed</u>
Initiation fee \$50.00, New Members	_____
Initiation Fee \$25.00 Returning Members (after lapse)	_____
Annual Dues by March 31, \$100.00 (Continual member)	_____
Dues Between, August and March, 31 \$50.00 (6 Months)	_____
Total Enclosed	_____

Note: Parade, Costume and Ball fees are extra.  
Fees and Dues are Non-Refundable once selected as a member. If membership is denied, Dues paid will be refunded, Initiation fee will not.

I understand that should I be elected a member of the Mystic Krewe of Avalon, I bind and obligate myself to pay the annual dues and function fees as per the Constitution and by-laws.

I further understand that I must wear a mask and costume during the parade and I must wear my costume for the Tableau and Ball.

Also, Female guests must wear a full formal that can be no more than six inches from the floor. Male guests to the Tableau and Ball must wear a Formal Black Tux.

I also understand that should I violate the rules and regulations of the Mystic Krewe of Avalon, it is within the power of the Captain or Board of Governors to impose fines or dismiss me as a member.

I have read and understood these conditions in order to be a member of the Mystic Krewe of Avalon.

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

**Mail To: The Mystic Krewe of Avalon, PO Box 18997, St. Louis, MO 63118**

**E-mail questions or for more information: [dandvkenn@email.msn.com](mailto:dandvkenn@email.msn.com)**

<u>Office use only:</u>	
Fees Received: Yes No	Previous Member Confirmed: Yes No Number: _____
Member Admitted: Yes No	Date Admitted: _____ Date Dues Returned: _____
Membership Package Mailed Date: _____	New Member Number: _____