



# Ye Mystic Krewe of the Santa Margarita

## MEMBERSHIP APPLICATION

2357 ASHMORE DRIVE, CLEARWATER, FL 33763

MEMBERSHIP@KREWEOFSANTAMARGARITA.COM

Name: \_\_\_\_\_  
Last First Middle

E-Mail \_\_\_\_\_  
*I hereby agree to receive Krewe E-mails.*

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

City: \_\_\_\_\_, State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Occupation/Employer: \_\_\_\_\_

(If Applicable)  
Spouse Name: \_\_\_\_\_  
Last First Middle

Spouse E-Mail \_\_\_\_\_  
*I hereby agree to receive Krewe E-mails.*

Children under 26: \_\_\_\_\_ Age: \_\_\_\_\_  
\_\_\_\_\_ Age: \_\_\_\_\_  
\_\_\_\_\_ Age: \_\_\_\_\_

Previous Krewe Membership?  Yes.  No

Krewe Name/Dates of Membership: \_\_\_\_\_  
\_\_\_\_\_

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

Sponsor Signature \_\_\_\_\_

### Membership:

#### Single

Application Fee: \$50.00  
Initiation Fee: \$375.00  
Annual Fee: \$375.00

#### Single + Guest and Family

Application Fee: \$50.00  
Initiation Fee: \$600.00  
Annual Fee: \$600.00

#### Corporate (=Family x 3)

Application Fee: \$50.00  
Initiation Fee: \$1,300.00  
Annual Fee: \$1,300.00

#### Seasonal\*

Application Fee: \$50.00  
Initiation Fee: \$100.00  
Annual Fee: \$100.00

\* discuss with Sponsor or  
Membership Captain

Please mail application and fees to:  
YMKSM Membership  
2357 Ashmore Drive  
Clearwater, Florida 33763

Krewe Use:  
Received: \_\_\_\_\_

Approved.  Denied

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

By: \_\_\_\_\_

*By submitting this voluntary membership application to Ye Mystic Krewe of the Santa Margarita, I agree to the Policies and Procedures of the Krewe. I understand that my application will be available to all current Krewe Members. I understand that my first year is provisional and will be considered again after my first. Year. I agree to submit all fees (see Membership Types) and understand that the Initiation and Annual Fees must be paid in full before I may participate in any Parade. Seasonal Memberships must pay Application, Initiation, and Annual Fee on submission.*

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

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