



**Application for Ye Krewe of Sir Henry
Morgan Membership** (please Print)

Name: _____
Address: _____
Cell Phone: _____ Home Phone: _____
Birth Date (Applicant must be 21 years or over): _____
E-Mail: _____

The following Krewe member has agreed to sponsor me for membership: **Signature of Member is required!!**

Print Name: _____

Signature: _____

I understand this is an application only, and that membership is subject to approval by YKSHM Board of Directors. Application must be accompanied by the current years dues of \$325.00. If my application is not accepted, all monies will be refunded within 7 days of decision.

Annual dues shall be \$325.00 per year. The Treasurer will bill all members August 1st of each fiscal year. All dues are to be paid in full, no later than September 1st, or member will be subject to a \$100.00 late fee. Those whose dues are not paid in full by November 1st, will no longer be member in good standing and will be dropped from the membership and removed from the Krewe Roster.

The Krewe has a NO-REFUND policy for dues and memberships are non-transferable. I understand that no medical or injury coverage is provided on my behalf, in the event of injury, during a Krewe function. I also agree to hold harmless Ye Krewe of Sir Henry Morgan, any of its members, officers, directors, contractors or sponsors liable for any personal injury or liabilities incurred throughout my participation in any of its activities. I also agree to follow all rules and regulations YKSHM, or will be subject to removal from membership.

My signature below attests that I have read and understand and will abide by all information above.

Signature _____ Date _____

Mail Application and all Monies to:

Ye Krewe of Sir Henry Morgan, P.O. Box 18735, Tampa, FL 33679-8735

For questions call or email: Annette Planes, Membership Chairperson

Phone # - 813-417-8947 • Email - annettesport@msn.com