

KREWE OF NEREIDS APPLICATION FORM

Return to: Maria Lott- Captain
P O Box 111, Waveland, MS 39576

The undersigned does hereby make application for membership in the Krewe of Nereids.

NAME: _____ PHONE: (HOME) _____
EMAIL: _____ CELL PHONE: _____
STREET ADDRESS: _____ CITY/STATE/ZIP: _____
AGE: _____ HEIGHT: _____ WEIGHT: _____ DRESS SIZE: _____
EMPLOYER: _____ OCCUPATION: _____
MARITAL STATUS: _____ SPOUSE: _____

Please list all organizations in which you have held past or present membership, including carnival organizations:

Offices held: _____

Are you able to give time and talents to the Nereids organization? In what capacity?

Should my application be accepted I agree to perform all duties expected of me by the organization and to abide by all regulations and bylaws of said organization.

I hereby obligate and bind myself to pay the membership application fee of \$100 and the membership dues of \$650 together with a \$100 den assessment fee. (All members have paid this special assessment fee.) Should my application not be accepted I understand the application fee of \$100 will be returned to me.

Upon notification of my acceptance, I agree to pay \$300 of the dues and the \$100 assessment fee on or before June 15th. The balance is due by July 30th. If paid by then the dues are reduced by \$50. I also agree to donate a minimum of 10 hours at the Nereids Den or pay an assessment of \$100. These 10 hours may be split up between several nights or Saturdays.

As a member of Nereids, I agree to participate in the Ball and Parade and to support any fund-raising projects as needed.

Date: _____ Signature: _____

We, the undersigned members in good standing hereby endorse the above applicant for membership in the Krewe of Nereids. The applicant is known to me personally and is of good moral character and reputation. It is our opinion that said applicant will be an asset to the organization. We have advised the applicant of the requirements for membership and she has understood and agreed to abide by the same.

1. Print Name _____ Signature: _____

2. Print Name _____ Signature: _____

3. Print Name _____ Signature: _____

ALL APPLICATIONS MUST BE RECEIVED BY APRIL 15TH

DISCLAIMER

Nereids, Inc. does not and shall not discriminate on the basis of race, color, religion, creed, age, national origin, disability, marital status, sexual orientation, military status and/or to the fullest extent possible, gender; being an all-female krewe, in any of its activities or operations. Nereids, Inc. is committed to providing an inclusive and welcoming environment for all members of our krewe, participants and guests of the masquerade ball, and entrants and parade goers of the annual parade, and their families, and to volunteers, subcontractors and vendors working with or on behalf of the krewe.

Please attach a short paragraph indicating why you would like to become a member and include a current picture of yourself.

