



Carnivale de Beausoleil

NEW MEMBERSHIP APPLICATION 2026-2027

Membership Dues \$400/Couple - \$250/Single

NAME(S): _____

ADDRESS: _____

PHONE NUMBER(S): _____

EMAIL ADDRESS(ES): _____

PLEASE ATTACH A ONE PAGE BIO, WHICH SHOULD INCLUDE PLACE OF EMPLOYMENT (if applicable), ANY SPECIFIC TALENTS, MARDI GRAS ACTIVITIES AND WHY YOU WOULD LIKE TO BE CONSIDERED FOR MEMBERSHIP

Referring Member(s): _____

PLEASE ATTACH YOUR LETTER OF RECOMMENDATION FROM THE SPONSORING MEMBER

Would you like to be considered for **KING** _____ **QUEEN** _____ of the next Royal Court?

Would you like to be considered for **ROYALTY** of the next Royal Court? _____ YES _____ No

Additional fees will be due when selected. The fees are set yearly by the board. **If a couple, please indicate who is interested to be considered for ROYALTY.** _____

Committee Sign-up: Please indicate "X" for the committees you would like to serve on.

If you would like to Chair a committee, please indicate with a "C".

If a couple, indicate who is interested in these positions

- _____ Costumes – Assist with the design and decorating of Royalty costumes
- _____ Foyer – Plan, design and construction of foyer
- _____ Invitations – Assist with design, selection and distribution
- _____ Membership – Coordinate activities and information for New Members
- _____ Programs – Assist with design, selection, solicit ads and distribute Program for the Ball
- _____ Publicity – Keep membership/public informed of krewe activities/information
- _____ Revelers – Lead the Krewe in merriment at the beginning of the Tableau
- _____ Royalty – Assist Board Member as needed with the Royal Court
- _____ Setup/Teardown – Assist day before and night of ball with setup/teardown
- _____ Social – Coordinate and plan parties and activities for the Krewe members
- _____ Souvenirs – Select and distribute Ball souvenirs and memorabilia
- _____ Table Seating – Assist Captain with seating based upon criteria set forth
- _____ Technical – Assist Captain with vendor contracts for the Ball

Member Signature: _____ **Date** _____

Member Signature: _____ **Date** _____

All checks payable to: CARNIVALE DE BEAUSOLEIL
Attn: Membership
PO Box 702, Broussard, LA 70518

_____ Cash	_____ Check
Date Paid _____	
Membership Accepted _____	Declined _____