



KREWE WHAT THOU WILT MEMBERSHIP PROCEDURE

Thank you for your interest in Krewe What Thou Wilt!

Krewe What Thou Wilt, established 2015 e.v., is the official Mardi Gras Krewe of Alombrados Oasis, OTO, located in the Valley of New Orleans. Our mission is to promulgate and celebrate Thelema within and beyond the Greater New Orleans area. We march on the first parading night of the season through the historic Marigny and French Quarter neighborhoods as an inner-krewe of *krewedelusion*, a surrealist and satirical Mardi Gras Parade. This year we will march on Saturday, January 27th, 2018.

In order to march, you must pay both *krewedelusion* dues and KWTW dues and fill out the respective Membership forms. For your convenience, the complete dues schedule is duplicated at the end of this overview.

STEP 1: *Krewedelusion* dues and Membership Paperwork

To pay your *krewedelusion* dues and fill out the mandatory membership form, please visit the *krewedelusion* website at <http://krewedelusion.org/membership/>. Presently, this website only takes PayPal payments. Paying via this method is preferred. If you need to pay by cash or check, you may give the money to the KWTW Captain, or the Treasurer of Alombrados. Simply bring payment to any Alombrados event, or mail checks (payable to *Krewedelusion*) to KWTW Captain, c/o Alombrados Oasis, 3151 Dauphine St. New Orleans, LA 70117. You can also email us at krewewhatthouwilt@gmail.com to arrange. Even if you are paying by cash or check, please fill out the online membership form via the “Pay in Person” option listed on the *krewedelusion* form. It only takes about two minutes to complete.

STEP 2: Krewe What Thou Wilt (Inner-krewe) dues and Membership Paperwork

You may pay your KWTW (Inner-krewe) dues via PayPal by sending a payment to krewewhatthouwilt@gmail.com and indicating your membership level (initiate, non-initiate) and FULL NAME in the notes section. You may also pay in person to the KWTW Captain or the Treasurer of Alombrados Oasis. Simply bring payment to any Alombrados event, or mail checks (payable to Alombrados Oasis) to KWTW Captain, c/o Alombrados Oasis, 3151 Dauphine St. New Orleans, LA 70117. You can also email us at krewewhatthouwilt@gmail.com to arrange. You must also complete and return the Application Form, and sign the Photo Release and Waiver of Liability Form, included in this package.

Levels of Membership

- **Initiate Member:** Open to initiates of the OTO marching in the parade. All Initiate Members must complete steps 1 and 2 above, following the appropriate dues schedule.
- **Associate Member:** Open to all non-initiates marching in the parade. Associate Members must complete steps 1 and 2 above, following the appropriate dues schedule.
- **Amicus Ordinem:** Open to friends of the order, anyone who will not march in the parade but who wishes to be a member of Krewe What Thou Wilt and show their support. Amicus Ordinem members do not have to pay *Krewedelusion* dues or fill out *Krewedelusion* paperwork. We do ask that you fill out the attached membership form. Membership fees are \$25 or more (payment above the \$25 base is not mandatory and is considered a donation). Dues may be paid any time before January 20th—although we encourage early payment as it will help Krewe What Thou Wilt produce the best parade possible this Mardi Gras.

Krewedelusion Dues Schedule

- **\$60 through October 1st 11:59 PM**
- **\$75 through December 15th 11:59 PM**
- **\$100 through January 15th 11:59 PM**
- **\$200 through January 22nd 11:59 PM**
- **NO DUES WILL BE ACCEPTED AFTER 12AM January 23rd 2018.**

Krewe What Thou Wilt Dues Schedule

- **Initiate Member:** If you are an Initiated Member of OTO, the dues structure is as follows:
 - **\$10 through October 1st 11:59 PM**
 - **\$15 through December 15th 11:59 PM**
 - **\$20 through January 15th 11:59 PM**
 - **\$25 through January 22nd 11:59 PM**
- **Associate Member:** If you are an Associate Member (not an Initiate of OTO), the dues structure is as follows:
 - **\$15 through October 1st 11:59 PM**
 - **\$20 through December 15th 11:59 PM**
 - **\$25 through January 15th 11:59 PM**
 - **\$30 through January 22nd 11:59 PM**

We look forward to marching with you in 2018. If you have any questions, please don't hesitate to contact Krewe Captain Ariel Moon at krewewhatthouwilt@gmail.com.



Application for Membership in Krewe What Thou Wilt
Peripatetica de Gnostica

Krewe What Thou Wilt, established in 2015 e.v., is the Official Mardi Gras Krewe of Alombrados Oasis, *Ordo Templi Orientis* (hereafter "OTO"). As a project of Alombrados Oasis, the rules and regulations set forth by the Board of Directors of KWTW are subject to the governing documents, rules and regulations of Alombrados Oasis, a local body of OTO. The mission of KWTW is to celebrate and promulgate Thelema within and beyond the Valley of New Orleans. Membership is open to anyone with a sincere interest in effecting and promoting the doctrines and practices of the philosophical and religious system of Thelema. Membership is not contingent upon membership in Alombrados Oasis or OTO. However, Initiated Members of OTO, tiled to the Minerval Degree, receive benefits reserved for this membership category, including reduced rates. The ability to serve on the Board of Directors or preside over a committee is reserved for Initiate Members of Alombrados Oasis, OTO who are dues current and in good standing. Please submit completed application form to the Captain of KWTW or to the Treasurer of Alombrados Oasis along with your dues payment, completed Photo Release and Waiver of Liability Form. If you wish to apply online you may email completed forms to krewewhatthouwilt@gmail.com, and send payment via PayPal to the same email address. Please refer to the Dues Schedule listed on the Membership Procedure sheet. You must pay both annual KWTW (innerkrewe) dues as well as *krewedelusion* dues by the established deadlines in order to march in the parade. Thank you.

Initiate Member

I am an Initiate of OTO and will march in *krewedelusion* as a member of KWTW. I certify that I am a dues current member of (Camp/Oasis/Lodge), located in _____.

Associate Member

I am not an Initiate of OTO and will march in *krewedelusion* as a member of KWTW.

Amicus Ordinem

I will not march in *krewedelusion*, but wish to be a member of KWTW.

First Name	Last Name
Current Address	
Permanent Address	
Phone Number	Cell Phone
Email Address	
Web-Site / Social Media	
Emergency Contact	

Signature

Date (xx/xx/xxxx)



NOTICE

Alombrados Oasis, like every US local body of OTO, maintains an online presence. Krewe What Thou Wilt will be taking photographs and documenting its activities along the way. In accordance with OTO USGL policy, local bodies are prohibited from posting a recognizable image, not in the public domain, of a person or persons (within the Order) without his or her express permission.¹ Accordingly, we ask you to please carefully read and review this release form. Whether you accept and sign is entirely your prerogative and does not affect your participation or membership in Krewe What Thou Wilt.

PHOTOGRAPHY RELEASE

I hereby grant my consent to Alombrados Oasis, OTO, its officers, subsidiaries, licensees, successors and assigns, the right to use, publish, and reproduce, for all purposes, pictures of me, including pictures of me in film or electronic (video) form, sound and video recordings of my voice, and printed and electronic copies of aforementioned in any and all mediums including, without limitation, online social media, internet web sites, and cable and broadcast television, and for exhibition, distribution, promotion, advertising, sale, press conferences, meetings, educational material, brochures and other print media. This permission extends to all languages, media, formats and markets now known or hereafter devised. This permission shall continue forever.

I further grant Alombrados Oasis, OTO, the irrevocable, perpetual, and unrestricted right, title, and interest that I may have in all such pictures, videos, negatives, reproduction, and copies of the original print, and further grant Alombrados Oasis, OTO the right to give, sell, transfer, and exhibit the print in copies thereof, for marketing, communications, or advertising purposes, as it deems fit.

I hereby waive the right to receive any payment for signing this release and waive any right to receive any payment for use of any of the material described above for any of the purposes authorized by this release. I also waive any right to inspect or approve aforesaid images of my likeness that may be used in conjunction wherewith or to approve the eventual use that it might be applied.

I acknowledge that I am eighteen years of age and am competent to contract in my own name. I have read this release before signing below and I fully understand the contents, meaning, and impact of this release. This document shall be binding upon me and my heirs, legal representatives, and assigns. So mote it be.

Print Name

Signature

Date (xx/xx/xxxx)

¹ “Local Body Website Policies – OTO USGL.” Local Body Website Policies – OTO USGL. N.p., n.d. Web. 24 Aug. 2015. <http://admin.oto-usa.org/internet-reseources/local-body-website-policies>.



WAIVER AND RELEASE OF LIABILITY

PLEASE READ THIS WAIVER AND RELEASE OF LIABILITY CAREFULLY BEFORE YOU SIGN IT. BY SIGNING THIS RELEASE YOU WILL BE WAIVING LEGAL RIGHTS.

In consideration for allowing me into Krewe What Thou Wilt (hereafter the “Krewe”), an Alombrados Oasis, Ordo Templi Orientis (hereafter “OTO”) event, which includes marching in the *krewe delusion* parade and participating in related Krewe events, I, for myself and on behalf of my heirs, executors, administrators, next of kin, successors, and assigns, all of whom shall be legally bound by this Waiver and Release, hereby agree as follows:

TO THE FULLEST EXTENT PERMITTED BY LAW, I, _____, RELEASE FROM LIABILITY AND WAIVE MY RIGHT TO SUE, INDEMNIFY, FOREVER DISCHARGE AND HOLD HARMLESS, ALOMBRADOS OASIS, OTO, PELICAN CAMP, OTO, OR ANY CAMP, OASIS, LODGE, OR GRAND LODGE OF OTO, OR ANY MEMBER OF THE KREWE and their respective direct and indirect owners, members, partners, directors, officers, employees, agents, representatives, contractors, principals, affiliated entities, mortgagees or ground lessors, servants, trustees, beneficiaries, heirs, successors, and assigns, and each and every person acting by, through, under, or in concert with them, or any of them (hereinafter individually and collectively referred to as the “**Indemnified Parties**”), of and from all manner of action or actions, cause or causes of action, at law or in equity, suits, claims, demands, damages, liability, lost cost or expense, of any nature whatsoever, known or unknown, fixed or contingent (hereinafter referred to as “**Claims**”), that I may have or hereafter have against the Indemnified Parties by reason of any injury or injuries that I may sustain, whether to my person and/or property, as a result of or incident to the Indemnified Parties’ negligence (whether active or passive), my participation in the Activity, and/or any and all risks assumed by me hereunder. **IF THE INDEMNIFIED PARTIES INCURS ANY OF THESE TYPES OF EXPENSES, I AGREE TO REIMBURSE THEM AND MAKE THEM WHOLE.**

I am voluntarily participating in this Activity. I understand that there are risks associated with my participation in this Activity, such as physical and/or psychological injury, pain, suffering, illness, disfigurement, temporary or permanent disability, economic loss or death. These injuries or outcomes may arise from my own or other’s actions, inactions, or negligence, or the condition of the Activity location(s) or facility(ies). Nevertheless, I assume all the risks of my participation in this Activity, whether known or unknown to me, including travel to and from the Activity (including travel by air, automobile, mule, or by foot) or any events incidental to this Activity. I agree to all these risks, agree that I am participating in the Activity at my own risk and waive all rights and claims against the Indemnified Parties.

If I need medical treatment as a result of my participation in this Activity, travel to and from the Activity (including air travel), or any event incidental to this Activity, I agree to be financially responsible for any costs incurred as a result of such treatment. I am aware that the Indemnified Parties do not provide health insurance for me and that I am wholly responsible for my medical expenses.

Initial Here: _____

Date: _____

I AM AT LEAST EIGHTEEN (18) YEARS OF AGE AND AM COMPETENT TO CONTRACT IN MY OWN NAME. I UNDERSTAND THAT BY SIGNING THIS RELEASE I AM GIVING UP MY LEGAL RIGHTS TO SUE THE INDEMNIFIED PARTIES AND/OR TO SEE COMPENSATION FROM THE INDEMNIFIED PARTIES FOR ANY INJURIES AND/OR DAMAGES THAT I MAY INCUR AS A RESULT OF THE ACTIVITY OR NEGLIGENCE OF THE INDEMNIFIED PARTIES, MY PARTICIPATION IN THE EVENT, AND/OR ANY RISKS ASSUMED BY ME HEREUNDER.

I HAVE READ THIS WAIVER AND RELEASE OF LIABILITY, UNDERSTAND ITS CONTENTS, AND AGREE TO ALL OF ITS TERMS.

So mote it be.

Print Name

Signature

Date (xx/xx/xxxx)