Mobile Area Mardi Gras Association, Inc.

Year Applying For: 2025 2026 2027 Position Appling For (check one): King Queen Knight Lady NOTE: This application has four (4) pages and a checklist. Please be sure to complete all pages. Any incomplete applications will be discarded. PERSONAL INFORMATION Female: Male: First Name Middle Last Mailing Address City State Zip Home Phone # () Cell Phone # () Birth date Height: ft in E-mail Twitter Name: InstaGram: Additional Social Media Names: Do you have any type of illness/allergies that requires assistance? If so, what?	Sig Sign	unior Monarch Court Application
NOTE: This application has four (4) pages and a checklist. Please be sure to complete all pages. Any incomplete applications will be discarded. PERSONAL INFORMATION Female: Male: Male: Last Last Last Last Last Last Last Last	OBILE TO AREA	Year Applying For: 2025 2026 2027
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Female: Male: First Name Middle Last Mailing Address City State Zip Home Phone # (
First Name Middle Last	PERSONAL INFORMATION	
Mailing Address	Female: Male:	
City State Zip	First Name M	liddleLast
Home Phone # () Cell Phone # () Birth date Height: ftin E-mail Twitter Name: InstaGram: Additional Social Media Names:	Mailing Address	
Birth date Height: ftin E-mail Twitter Name: InstaGram: Additional Social Media Names:	City	
Twitter Name: InstaGram: Additional Social Media Names:	Home Phone # ()	Cell Phone # ()
Additional Social Media Names:	Birth date Heigh	nt: ft in E-mail
	Twitter Name:	InstaGram:
Do you have any type of illness/allergies that requires assistance? If so, what?	Additional Social Media Names:	
	Do you have any type of illness/allerg	gies that requires assistance? If so, what?
Do you have a child or children? All court participa cannot have a child. If selected, and a court member becomes a mother or father, he or she wil removed from the court immediately, without any refunds.		ities that requires outside assistance? If so, what? What type of assistance would be?

FAMILY INFORMATION

Parents Marital Status: S	Single Married Dive	orced/Separated
Deceased: Father	Mother	
If Applicable: Step-Parent Na	me(s)	
Do you have family members name, court title, and year of		oyal Courts? If so, please list their
FATHER'S INFORMATIO	<u>N</u>	
Name		
Address		
		Zip
Phone# (home)	Phone# (work)	Phone# (cell)
Occupation	Place of Employment	
Email Address		
MOTHER'S INFORMATION) N	
City	State	Zip
Phone# (home)	Phone# (work)	Phone# (cell)
Occupation	Place of Employment	
Email Address		

Brother(s) (Names and Ages)		
Grade Level:	GPA:	
School Name		
City	State	
Principal	Counselor	
Phone#	Graduation Date	
PERSONAL INFORMATION		
Name you prefer to be called	Hometown	
College Attending or Preference	Career Goals	
School Activities, Honors, Awards, 1		
Special Talents, Interest, Hobbies (1 2 3		
4		

Why would you like to be a member of the Junior Monarch Court?	
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CHECKLIST:
Completed application.
Participants in $\underline{10^{th} - 12^{th} \text{ grades}}$ (Junior Monarchs) must submit a copy of your 3 rd quarter report card or current comprehensive progress report.
ALL Participants (NO EXCEPTIONS) must submit one (1) letter of recommendation from ONE of the following on professional letterhead:
Current principal Current assistant principal Current counselor Current teacher
Attach a <u>CURRENT</u> photo of yourself with this application.
ALL applications must be postmarked by March 31st
Please mail, scan and email the application with the supplemental documents to:

Mobile Area Mardi Gras Association (MAMGA)
ATTN: Coronation Chairperson
P O Box 86
Mobile, AL 36601
Applications can be scanned and emailed to the address below

mamga1938@gmail.com