PETITION FOR INITIATION AND MEMBERSHIP _____SHRINERS

			SHRINERS,	
			, DESERT OF:	
	:			
			tanding in	
Louge #	located at City		State	
more, I have reside	d at my current address for not less	s than 6 months,	and Masters of North America. Further- as required by the Bylaws of The Imperi- tic Shrine, and become a member of your	
	y, and my request granted, I promi uncil and the Bylaws and Ceremon		the Articles of Incorporation and Bylaws ble.	
Birthplace Date of			Date of Birth	
Were you ever a De	eMolay? If so, what was th	e Chapter name	and location?	
Profession or occup	pation			
Have you previous	ly applied for admission to any ter	nple of the Orde	r?	
If so, what temple?			When?	
Residence Address	: Street			
	Street		City	
	County	State	ZIP	
Business Address:				
	Street		City	
	County	State	ZIP	
Business Phone:				
Mail Address:				
Home Phone:				
E-mail Address:				
Wife's name:				
Date	20 Signature			
Print Full Name He	Name in full, initials not sufficient			
Recommended and	l Vouched for on the Honor of:			
Noble		Mer	Membership No.	
	Method of payment		-	