

PETITION FOR ASSOCIATE MEMBERSHIP

TO THE POTENTATE, OFFICERS AND NOBLES OF ORAK SHRINE, SITUATED IN MICHIGAN CITY, INDIANA:

I, (Print full name)				
Residence Address		City		
County	State	Zip	Phone	
Birthplace	Date of Birth	Spous	Spouse/Lady Name	
Email				
Profession or Occupation	Bus	Business Name		
Business Address		City		
County	State	Zip	Phone	
I, the undersigned, a Noble of the Orde	initiated in Shriners, located at			
on(date) a eligible under §323.10(a) for a demit,	nd presently a member of Shriners lespectfully pray that I may be admi	ocated atitted as an associate m	ember of your temple in acco	being being bridance with §323.7.
I am a Master Mason in good standing (City)	; in	(0: ::)	Lodge No.	located at
Scottish RiteYork Rite	Loc	ation		
Other	Loc	ation		
Were you ever a DeMolay? If	so, what Chapter & location?			
SIGNATURE		Date		and the second s
	RECOMMENDED AND VOUC	CHED FOR ON THE	HONOR OF	
First Line Signer (Please pr	int)		Second Line Signer (Ple	ase print)
Name		Name		
Member No.		Member No		×135-2-1610
Address	****	Address		
City, St, Zip		City, St, Zip		
Phone		Phone		

***ORAK SHRINE PORTION OF DUES FOR CURRENT YEAR ***
(No Per Capita or Hospital Assessment)