

PETITION FOR INITIATION AND MEMBERSHIP

MEMBER # _____



SPHINX SHRINERS

NEWINGTON, CONNECTICUT

Print Full Name _____
APPLICANT

Recommended by:

1st Line Signer: _____
NOBLE MEMBER #

2nd Line Signer: _____
NOBLE MEMBER #

To the Illustrious Potentate, Officers and Nobles of Sphinx Shriners, situated in the Oasis of Newington, Desert of Connecticut:

I, the undersigned, hereby declare that I am a Master Mason in good standing in _____ Lodge, # _____, located at _____.

CITY AND STATE

Which is a Lodge recognized by or in amity with the Conference of Grand Masters of North America. Furthermore, I have resided at my current address for not less than 6 months, as required by the Bylaws of the Imperial Council. I respectfully pray that I may be made a Noble of the Shriners, and become a member of Sphinx Shriners.

If I be found worthy and my request granted, I promise to conform to the Articles of Incorporation and Bylaws of the Imperial Council and the Bylaws and Ceremonies of Sphinx Shriners.

Birthplace _____ Date of Birth _____

Where you ever a DeMolay? _____ If so, Chapter name and location: _____

Profession or Occupation _____ Wife's Name: _____

Have you previously applied for admission to any Temple of the Order? _____

If so, Temple name _____ When? _____

Residence _____
NUMBER & STREET CITY, STATE, ZIP

Residence Phone: _____ Cell Phone: _____

Business Address: _____
NUMBER & STREET CITY, STATE, ZIP

Business Phone: _____

E-Mail: _____ Nickname: _____

Date _____ Signature _____

COMPLETE NAME (FIRST, MIDDLE, LAST)

THIS PETITION MUST BE ACCOMPANIED BY INITIATION DEPOSIT OF NOT LESS THAN \$20 AND MUST BE FILED WITH THE RECORDER, PO BOX 310157, NEWINGTON, CT 06131 AT LEAST 7 DAYS PRIOR TO DATE OF THE CEREMONIAL

INITIATION FEE \$224

INCLUDES ANNUAL DUES, FEZ AND SHRINERS HOSPITAL ASSESSMENTS – MAKE CHECKS PAYABLE TO SPHINX SHRINERS

FOR OFFICE RECORD: _____ CASH _____ CHECK AMOUNT RECEIVED _____ DATE _____ BAL DUE _____