



ALEPPO SHRINERS



Shriners International

99 Fordham Road

Wilmington, Massachusetts 01887-2148 (978-657-4202)

Date _____

PETITION FOR INITIATION AND MEMBERSHIP

*To the Potentate, Officers and Nobles of the Aleppo Shriners,
Situated in the Oasis of Wilmington, Desert of Massachusetts*

I, _____, hereby declare that I am a Master Mason in good standing in
PRINT NAME IN FULL _____ Lodge, A.F.&A.M.

located at _____
CITY 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 more than 6 months, as required by the Bylaws of Shriners International. I hereby make application to become a Noble of Shriners International, and a member of your Shrine Center.

If granted membership, I promise to conform to the Articles of Incorporation and Bylaws of Shriners International and the Bylaws and Ceremonies of your Shrine.

Birthplace _____ Date of Birth _____ Age _____

Telephone _____ Cell # _____

Mailing Address _____

City _____ State _____ Zip _____

E-Mail Address _____

Profession or Occupation _____

SPOUSE / SIGNIFICANT OTHER

Name _____

Telephone _____ Cell # _____

Mailing Address _____

City _____ State _____ Zip _____

E-Mail Address _____

Were you ever a DeMolay? _____ If so, what Chapter name and location _____

Have you previously applied for admission to Shriners International? Yes No

If Yes, what Shrine Center? _____ When? _____

RECOMMENDED AND VOUCHED FOR ON THE HONOR OF:

1) Noble _____

SPONSOR SIGNATURE

MEMBERSHIP # (ON DUES CARD) _____

PRINT NAME IN FULL

Address _____

NUMBER AND STREET

CITY/STATE/ZIP

2) Noble _____

2ND SPONSOR SIGNATURE

THE FEE MUST ACCOMPANY THE APPLICATION.
MAKE CHECKS PAYABLE TO "ALEPPO SHRINERS"
TO PAY BY CREDIT CARD PLEASE CALL 978-657-4202 EXT. 216
APPLICATION FOR SHRINE MEMBERSHIP IS NOT TAX DEDUCTIBLE.

Candidate Hat Size: _____

Candidate
Signature _____

PRINT FULL NAME - INITIALS NOT SUFFICIENT

Credit Petition to **one** of the following:

_____ Shrine Club

(or) _____ Unit

FEE \$175.00

FEZ \$75.00

TOTAL \$250.00

