

PETITION FOR INITIATION AND MEMBERSHIP
MOHAMMED SHRINERS

To: The Potentate, Officers and Nobles of Mohammed Shrine, situated in the Oasis of Peoria,
Desert of Illinois. I, the undersigned hereby declare that I am a Master Mason

In good standing in _____ Lodge No. _____

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 not less than 6 months, as required by the by-laws of the Imperial Council. I respectfully pray that I may be made a Noble of the Mystic Shrine, and become a member of your Shrine. If I be found worthy, and my request granted, I promise to conform to the articles of incorporation and by-laws of the Imperial Council and the by-laws and ceremonies of your Shrine.

Birthplace: _____ Date of Birth: _____

Were you ever a DeMolay? Yes / No, If so, what was the Chapter Name _____
and Location: _____

Profession or occupation: _____

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

If so, to what Shrine? _____ When? _____

Residence Address: _____
Street City County State Zip

Business Address: _____
Street City County State Zip

Business Phone No. _____ Home Phone No. _____

Mail Address: _____
Street City County State Zip

Wife's Name: _____ e-mail address: _____

Date: _____, 20 _____ Signature: _____

Print full Name here: _____
(name in full, initials not sufficient)

Recommended and vouched for on the honor of:

Noble: _____

Noble: _____

E-Mail address _____

Do you have a motorcycle license? Yes / No

Do you play any musical instrument? Yes / No, if so, what? _____

Were you a member of the Armed Forces? Yes / No, if so, what branch? _____

Do you own a antique car? Yes / No

Do you have a desire to become a Shrine clown? Yes / No

Are you a license pilot? Yes / No

Are you a Past Master of your Lodge? Yes / No

Were you ever a member of any Police organization? Yes / No

Are you a member of the Scottish Rite? Yes / No

Are you a member of the York Rite? Yes / No

Are you a member of the Grotto? Yes / No

Is your spouse socially inclined? Yes / No

Would she consider exploring an organization that supports the Shrine Hospitals? Yes / No

INSTRUCTIONS FOR THE CANDIDATE FROM THE RECORDER

Candidates must pay full initiation fee and prorated dues, which includes Hospital assessment before being inducted to the Shrine.

<u>IF INITIATED IN</u>	<u>DUES</u>	+	<u>INITIATION FEE</u>	=	<u>TOTAL</u>
JAN, FEB, MAR	\$69.00	+	\$125.00	=	\$194.00
APR, MAY, JUN	\$54.00	+	\$125.00	=	\$179.00
JUL, AUG, SEP	\$39.00	+	\$125.00	=	\$164.00
OCT, NOV, DEC	\$24.00	+	\$125.00	=	\$149.00

MAKE ALL CHECKS PAYABLE TO: MOHAMMED SHRINE

4201 S. Industry RD
Bartonville, IL 61607-2844