## **Application for Affiliation**

The subscriber respectfully	petitions for memb	ership in	Lodge	No
and pledges himself to a ch	neerful obedience to	your by-laws and	d the Ancient Usag	es of Masonry.
******	*****	******	******	*****
(CIVE CIV ONE)	Transfer h	is Membership		
(CHECK ONE)	Apply for l	Plural Membership		
*****	******	*****	******	*****
Name of Applicant				
Date of Birth:	Place of Birth:	Place of Birth:SSN (optional)		
Married or Single?	Wife's Name			
Residence Address		City	State	_ Zip
Mailing Address if different _		City	State	_Zip
Residence Telephone: ( )		Business Telephon	ne: ( )	
Present Occupation		_ Employed by		
Have you ever been an Officer	in a Lodge?If s	o, what office held _		
in Lodge	No	, (city)		(state)
Dated thisday of	, A.D. Yr.	·		
		(Signa	ture of Applicant in	full)
We recommend and endorse t	his Application:			
Brother				
Brother				

Application    Column	REPORT OF COMMITTEE
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