



PETITION FOR INITIATION AND MEMBERSHIP

To the Illustrious Potentate, Officers and Nobles of

OLEIKA SHRINE TEMPLE

Member # _____
QTR _____
Amount Paid _____
Balance _____
Check / Cash / MO _____
Number _____

I, the undersigned, do hereby declare that I am a MASTER MASON in good standing in _____ Lodge Number _____ F.&A.M. located in _____ State _____ Previous / current Officer (Yes / No) 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 Oleika Shriners

If I be found worthy, and my request granted, I Promise to conform to the Articles of Incorporation, and the By-Laws of the Imperial Council and the By-Laws and Ceremonies of Oleika Shriners, including attending the ceremonial when requested.

PETITIONER: Print name in full (First, Middle, Last)

Signature (of ALL names in FULL, initials not sufficient)

Birthplace (city, state) _____ Date of Birth(mm/dd/yyyy) _____

Profession or occupation _____

State specifically: If a merchant, traveling salesman or agent, indicate plainly the line of business, full details, Is retired then former occupation.

Residence/Mailing Address _____

Business Address _____

Home Phone (____) _____ Cell Phone (____) _____ Work Phone (____) _____

E-Mail Address _____

Nick Name _____ Lady's _____ Noble Fez Size _____

Have you previously applied for admission to ANY Temple of the Order? _____ No _____ Yes - Temple _____ Date ____/____/____

Recommended and vouched for on the honor of

1st. Noble _____ 2nd. Noble _____

Printed Name _____ Printed Name _____

Member Number _____ Member Number _____

Fees Total: Jan 1 – Mar 31 \$271.50 Apr 1 - Jun 30 \$255.00 Jul 1 – Sept 30 \$242.00 Oct 1 – Dec 31 \$297.00

(Fees are calculated on what Quarter you go thru ceremonial.)

For the Recorder: Petition Received Date ____/____/____ Election Date ____/____/____ Created Date ____/____/____

Fees Paid: Date ____/____/____ Amount (Check/Cash) \$ _____

Date ____/____/____ Amount (Check/Cash) \$ _____