

PETITION FOR ASSOCIATE MEMBERSHIP
OLEIKA SHRINERS

To the Potentate, Officers and Nobles of Oleika Shriners, situated in the City of Lexington, State of Kentucky:

I, the undersigned, a Noble of the Order, initiated in _____
Shriners, located at _____ on ___ / ___ / ____ and presently a
member of Shriners, located at _____ being
eligible under §323.10(a) for a demit, respectfully pray that I may be admitted as
an associate member of your temple in accordance with §323.7.

I am a Master Mason in good standing in _____ Lodge,
No. _____, located at _____,
or have otherwise met the prerequisites for membership under the bylaws of
Shriners International.

Birthplace _____ Date of Birth ___ / ___ / _____

Profession / Occupation _____

Residence: _____

Street County City State Zip

Business: _____

Street County City State Zip

Mailing Address: _____

(If different) Street County City State Zip

Telephone: Res: _____ Bus: _____

Cell phone: _____ Alt. phone: _____

Email Address _____

Name of Spouse _____

Date 20____

Signature _____

Name in Full, initials not sufficient.

Print Full Name Here _____

Recommended By _____

Noble _____

Noble _____