APPLICATION FOR PERPETUAL MEMBERSHIP
FOR
VALLEY OF MIDDLE GEORGIA
SCOTTISH RITE

P.O. Box 7028
Warner Robins, GA 31095

I hereby make application for a Scottish Rite Perpetual Membership under the provisions of the Valley of Middle Georgia Membership Trust. I certify that I am a member in good standing in the Scottish Rite Bodies indicated below. I understand that this money will be placed in a trust fund and the income there from used to support my Scottish Rite Bodies by paying my yearly membership Dues. I further understand and agree that a condition of this Perpetual membership is that if accepted, the membership fee is ***NON-REFUNDABLE****. If accepted I therefore waive any and all rights to reclaim this fee.*

Full Name: _____

Valley of Middle Georgia Membership Number: _____

Address: _____

City: _____ ***State:*** _____ ***Zip Code:*** _____-_____

Date of Birth: ____/_____/_____ ***Age:*** _____

(MM / DAY / YEAR)

PERPETUAL MEMBERSHIP FEE: (Select Box Per Age)

Age 18 to 55: [ ] ($1700.00) ***Age 55 an older: [ ] ($1400.00)***

Payment Method:

Check: { } (Please make check payable to: Valley of Middle Georgia, SR.)
(In the remarks section note: Perpetual Membership Trust)

Cash: { }

Credit Card: { }

Payment Plan: { }

I understand that an initial payment of at least $250.00 is required with my application with the total payment being due within a three (3) year time frame. My annual Scottish Rite dues are $_____. The total amount of my Perpetual/Lifetime Membership Fee will be no greater than [ ] $1700.00 or [ ] $1400.00 (check appropriate amount). The remainder of the cost of Perpetual Membership Fee will be paid in _____ equal payments of $____.___, [ ] Monthly, [ ] Quarterly, [ ] Semi-annually, or [ ]Annually commencing _____ 20___. The total of my payments will be transferred to the regular Perpetual Membership Trust and this amount is not subject to any increase in dues that may be voted by these bodies. I also understand that I will be required to pay my annual dues to the Scottish Rite Bodies until my Perpetual Membership is paid in full.

Payment in full must be received within three (3) Years from the initial payment. If payment in full is not made within three (3) years, the applicant may continue in the plan by establishing a new plan, only upon the direction of the General Secretary. If the applicant should die before the Perpetual Membership Fee is paid in full, all monies paid and earnings thereon will remain in the Perpetual Membership Trust and the membership will then be changed to a Memorial Perpetual Membership.

*A check in the amount of $_____.____ to cover my initial payment is attached. (****Please make check payable to: Valley of Middle Georgia, SR.) (In the remarks section note: Perpetual Membership Trust).***

_____ _____

(Signature) ***(Date)***

Attest:
I hereby certify that the Brother whose name appears on this application is entitled to the Perpetual Membership status indicated above and that the attached payment is in the correct amount.

General Secretary: _____ ***Date:*** _____