

HADI SHRINERS



6 Walnut Street • PO Box 1 • Evansville, IN 47701-0001
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www.hadishrine.org

PETITION FOR ASSOCIATE MEMBERSHIP

To the Potentate, Officers and Nobles of Hadi Shriners,
Situated in the City of Evansville, State of: Indiana

I, the undersigned, a Noble of the Order, initiated in _____ Shriners,
located at _____ on _____ (date)
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 _____

Birthplace _____ Date of Birth _____

Profession or Occupation: _____

Home Address: _____

Business Address: _____

Mailing Address: _____

Phone: Home: _____ Cell: _____ Bus: _____

Email Address: _____ Wife's Name: _____

Full Name: (Please Print) _____

Signature: _____ Date: _____

Recommended By:

Noble: _____ Member No. _____

Noble: _____ Member No. _____

OFFICE USE ONLY

APPROVED/DENIED ON: _____

ENTERED IN MEMBERSHIP: _____

ENTERED BY: _____

DATE OF STATUS CHANGE: _____