## PETITION FOR ASSOCIATE MEMBERSHIP SHRINERS ANCIENT ARABIC ORDER OF THE NOBLES OF THE MYSTIC SHRINE

TO THE POTENTATE	, Officers and Nobles	OF			
SHRINERS, SITUATE		_, Desert of			
SHRINERS, located	gned, a Noble of the My atSHR	_ on RINERS, loca	ted at	(date) and	presently
that I may be admi	tted as an associate men				
I am a Master Mas	on in good standing in				Lodg
No	, located at				
Birthplace Date of Birth					
Profession or occu	pation				
Residence	Number and Street	City	County	State	e Zip
Business Address	Number and Street	City	County	State	z Zip
Mail Address	Number and Street	City	County	State	e Zip
Telephone: Res:	a/c ()		Bus: a/c ()_		
E-Mail Address					
Wife's Name					
Date	20				
	Signature	N	AME IN FULL, <i>init</i>	ials not suffi	cient.
PRINT FULL NAME	Here				
RECOMMENDED BY					
Noble					
Nori e					