

Form #4

PETITION FOR RESTORATION

_____ **SHRINERS**

TO THE POTENTATE, OFFICERS AND NOBLES OF _____
SHRINERS, SITUATED IN THE CITY OF _____, STATE OF _____ :

I, the undersigned, as a member of _____ SHRINERS, was suspended for non-payment of dues in the _____ dues year, and I respectfully request that I be restored to membership in _____ SHRINERS.

I have liquidated all indebtedness to _____ SHRINERS, and if my request is granted, I promise to conform to the articles of incorporation and bylaws of Shriners International, together with those of this temple. I furthermore declare that I am a Master Mason in good standing _____ Lodge, No. _____, located at _____, or have otherwise met the prerequisites for membership under the bylaws of Shriners International.

PRINT FULL NAME _____

Date of Birth _____ Profession/Occupation _____ Retired? Yes

Residence: _____
Street address, County, City, State, Zip

Mail Address (if different): _____
Street address, County, City, State, Zip

Home Phone: _____ Cell phone: _____

Business phone: _____ Email: _____

Spouse's Name: _____ Email: _____

Petitioner's Signature _____ Date: _____ 20____

RECOMMENDED BY:

NOBLE _____ MEMBER NO. _____