

## **RESTORATION INSTRUCTIONS**

A Noble who has been suspended from any other Shrine Temple may restore his Shrine membership directly into Medinah Temple if he meets the following two criteria.

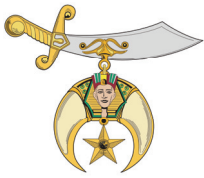
1. He is a resident of Illinois living in any county **except** Saint Clair, Sangamon, Peoria or Winnebago.
2. He is current as a Master Mason in a blue lodge recognized by the Conference of Grand Masters.

Former members of Medinah can restore membership regardless of their residence. They must, however, show evidence of good standing as a Master Mason.

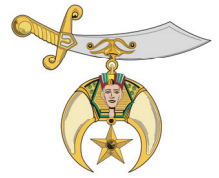
### **PROCEDURE**

1. Complete the RESTORATION PETITION.
  - a. If you do not know members to sign the sponsor lines, leave them blank
2. Please contact the Records office at 630-889-1400, to determine the amount of your Restoration fee.

There is no balloting involved. Your current dues card will be mailed to you promptly.



**PETITION FOR RESTORATION**



**MEDINAH SHRINERS**

SHRINERS INTERNATIONAL  
Desert of Illinois  
550 N. Shriners Drive  
Phone 630.889.1400

Oasis of Addison  
Addison, IL. 60101  
Fax 630.705.9907

Application Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year

To the Illustrious Potentate, Officers and Nobles of Medinah Shriners situated in the Desert of Illinois.

Print Full Name: \_\_\_\_\_

Print name, as mail should be addressed: \_\_\_\_\_

Print Address: \_\_\_\_\_

Print City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Ext: \_\_\_\_\_

Fax: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Place of Birth: \_\_\_\_\_ Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Copy of Blue Lodge Dues Card  Verified with Grand Lodge

Member Of: \_\_\_\_\_ Lodge# \_\_\_\_\_

Located At: \_\_\_\_\_ Year Raised: \_\_\_\_\_

I, the undersigned, a former member of Medinah Shriners, and now under the sentence of SUSPENSION because of non-payment of dues, respectfully request that I may be restored to Membership.

I have liquidated all indebtedness to the Shriners and if my request be granted, I promise to conform to the Articles of Incorporation and bylaws of the IMPERIAL COUNCIL OF SHRINERS INTERNATIONAL together with those of Medinah Shriners. I further declare this petition is completed to the best of my knowledge.

Signature: \_\_\_\_\_ /\_\_\_\_/\_\_\_\_  
(Must be written in full) First Middle Last Date signed

(To be completed by Noble when presenting petition)

RECOMMENDED AND VOUCHERED FOR ON THE HONOR OF: Medinah Shriners Membership #

Sponsor's Signature: \_\_\_\_\_ # \_\_\_\_\_

Sponsor's Name Printed: \_\_\_\_\_

Sponsor's Signature: \_\_\_\_\_ # \_\_\_\_\_

Sponsor's Name Printed: \_\_\_\_\_