PETITION FOR ASSOCIATE MEMBERSHIP



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

Full Name:			Nickname:		
Address:			City:		
State: ZIP:	Birth Date:/	/ Place of Birth: _			
Email:		Cell:	Home	:	
Bus. Phone:	Occupation:	Occupation: Employer:			
Military Service	Branch		Rank		
Lady's Name:		Lady's Birth Date://			
Lady's Cell:	Lady's	Email:			
Member Of: Located At: I, the undersigned, a No at Temple, located at	bble of Shriners Internationa , on//_	Lodge# Year Raised I, initiated in and last a member, being eligible	l:Te Te of under #323.10(a) for a Der		
Signature:					
(Must be written in	full) First	Middle	Last	Date signed	
Sponsor's Signatur	e:		Member #		
Sponsor's Signatur	e:		Member #		