

A Petition

COMBINATION - ALL PURPOSE FORM

To the Chapter, Council and Commandery comprising the

York Rite

FULL NAME (PRINT)	LAST	FIRST	MIDDLE	PLACE OF BIRTH	DATE OF BIRTH	AGE
RESIDENCE ADDRESS	CITY	ZIP	NO. OF YRS.	HOME PHONE NO.		
EMAIL ADDRESS				CELL PHONE NO.		
OCCUPATION	FIRM	ADDRESS ALL MAIL AS INDICATED BY "X"		<input type="checkbox"/> TO HOME ADD.	<input type="checkbox"/> TO BUS. ADD.	
BUSINESS ADDRESS	CITY	ZIP	NO. OF YRS.	WORK PHONE NO.		
SPOUSE'S NAME			MONTH/DAY OF BIRTH			
HAVE YOU EVER BEEN REJECTED BY ANY YORK RITE BODY? <input type="checkbox"/> NO <input type="checkbox"/> YES IF ANSWERED "YES" NAME THE BODY & DATE (USE OTHER SIDE FOR DETAILS)						
I AM PRESENTLY A MEMBER IN GOOD STANDING OF:						
I am, presently, a member in good standing of (or have petitioned as indicated)	LODGE NO.	AT	STATE			
	<input type="checkbox"/> I HAVE A PENDING PETITION WITH CHAPTER NO.	AT	STATE			
	<input type="checkbox"/> I HAVE A PENDING PETITION WITH COUNCIL NO.	AT	STATE			
	<input type="checkbox"/> I HAVE A PENDING PETITION WITH COMMANDERY NO.	AT	STATE			

<i>Petition</i>	IS HEREBY MADE ON THIS	DAY OF	Mo-Year	TO THE OFFICERS & MEMBERS OF THE BODY (OR BODIES) NAMED BELOW		
TO	CHAPTER NO.	R.A.M. AT	WHOSE ANNUAL DUES ARE \$			
<input type="checkbox"/> FOR DEGREES AND MEMBERSHIP WITH A FEE OF \$	OF WHICH \$	IS ATTACHED*	<input type="checkbox"/> FOR AFFILIATION (SEE NOTE AT RIGHT)	<input type="checkbox"/> FOR REINSTATEMENT DUES IN AMOUNT OF \$	<input type="checkbox"/> ATTACHED OR PAID \$	
RECOMMENDED BY:						
COMPANION			& COMPANION			
TO	COUNCIL NO.	C.M. AT	WHOSE ANNUAL DUES ARE \$			
<input type="checkbox"/> FOR DEGREES AND MEMBERSHIP WITH A FEE OF \$	OF WHICH \$	IS ATTACHED*	<input type="checkbox"/> FOR AFFILIATION (SEE NOTE AT RIGHT)	<input type="checkbox"/> FOR REINSTATEMENT DUES IN AMOUNT OF \$	<input type="checkbox"/> ATTACHED OR PAID \$	
RECOMMENDED BY:						
COMPANION			& COMPANION			
TO	COMMANDERY NO.	K.T. AT	WHOSE ANNUAL DUES ARE \$			
<input type="checkbox"/> FOR DEGREES AND MEMBERSHIP WITH A FEE OF \$	OF WHICH \$	IS ATTACHED*	<input type="checkbox"/> FOR AFFILIATION (SEE NOTE AT RIGHT)	<input type="checkbox"/> FOR REINSTATEMENT DUES IN AMOUNT OF \$	<input type="checkbox"/> ATTACHED OR PAID \$	
RECOMMENDED BY:						
S.K.			& S.K.			
THE UNDERSIGNED represents that all of the above statements relating to his current membership status in the body (or bodies) named are true and correct. That he is desirous of receiving (or, if the petition is for Affiliation or Reinstatement only, he has received) the Degrees and Orders as conferred in the specifically named body (or bodies) listed above. Further, that if he becomes a member of that body (or bodies) to which this petition is directed, he will cheerfully conform to all the laws, ancient customs and usages of each such body.			THE UNDERSIGNED further confirms, that insofar as his petition relates to his becoming a member of the named Commandery of Knights Templar, he is a firm believer in the CHRISTIAN RELIGION.			
(SIGNATURE IN FULL)						

*1/3 of total fee for each body must accompany this Petition.

★ Plus \$1.00 Eye Foundation Assessment.

THIS IS AN "ALL PURPOSE" PETITION FORM

It may be used by a Chapter, Council or Commandery for:

- a. Degrees (or Orders) and Membership
- b. Affiliation (by Dimit or Certificate of Good Standing. Attached hereto.)
- c. Reinstatement to Membership

It may be used to Petition any one body, or combination of any two or three bodies, for any combination of purposes as named above. No other Petition Form is required.

INSTRUCTIONS FOR USE

To the Petitioner

- 1. Use ink or typewriter and print all requested information except signature.
- 2. Have your "Recommendor" assist you in the completion of the form and determination of the required fees.
- 3. It is preferred, that all payments of fees be made by check with a separate check being prepared for each named body.

To the Recommendors

- 1. Be sure that the form is complete as to the Name of each Body, its fees and its dues.
- 2. Sign in the space provided. (Two signatures are required for each Body).
- 3. Sign Only if YOU are a member of the named Chapter, named Council, or named Commandery. If you are not a member of the named Body, you cannot sign as the Recommendor and should leave the signature space blank.
- 4. Lacking a signature of recommendation, the Principal Officer or Secretary (Recorder) may Sign the Petition as the Recommendor for his specific Body named.
- 5. Secure the necessary fee (or fees) from the Petitioner. NOTE: At least 1/3 of the total fee must be obtained for each Body. As many as three checks may be required.

SPECIAL NOTE REGARDING COMMANDERY PETITIONS

Where the Petition is for Orders or for Reinstatement, the Annual Assessment for the Knights Templar Eye Fourédation (presently \$1.00) must also be included in the check. This item is not a part of a Commandery's fees or dues.

- 6. Recommendor is to transmit this Petition (with check(s) attached) to the Secretary (Recorder) of the FIRST NAMED BODY to which Petition is directed.

To the Secretary or Recorder first receiving the Petition

- 1. Check Information entered on Petition to insure its completeness and accuracy. Add missing information or correct as necessary.
- 2. Make (or have made) a Photocopy (Xerox or other) of the face of this Petition for EACH YORK RITE BODY to which this Petition is directed (Other than your OWN).
- 3. Keep the ORIGINAL Petition and send the Photo Copy (with accompanying check) to the named Body (or Bodies). Balance of handling in the normal manner.
- 4. Complete the Information you may require In the Right Hand Section of the form.

To the Secretary or Recorder receiving a Photo Copy of this Petition

- 1. Verify the completeness and accuracy of information provided.
- 2. Handle in the normal manner.
- 3. Record information in the space provided at the Right Hand Side as you may require.

<p>THIS SPACE FOR USE BY PETITIONER</p>
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