

**PETITION FOR INITIATION AND MEMBERSHIP**  
**MOHAMMED SHRINERS**

To: The Potentate, Officers and Nobles of Mohammed Shrine, situated in the Oasis of Peoria,  
Desert of Illinois. I, the undersigned hereby declare that I am a Master Mason

In good standing in \_\_\_\_\_ Lodge No. \_\_\_\_\_

Located at \_\_\_\_\_,  
City State

Which is a Lodge recognized by or in amity with the conference of Grand Masters of North America. Furthermore, I have resided at my current address for not less than 6 months, as required by the by-laws of the Imperial Council. I respectfully pray that I may be made a Noble of the Mystic Shrine, and become a member of your Shrine. If I be found worthy, and my request granted, I promise to conform to the articles of incorporation and by-laws of the Imperial Council and the by-laws and ceremonies of your Shrine.

Birthplace: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Were you ever a DeMolay?  Yes /  No, If so, what was the Chapter Name \_\_\_\_\_  
and Location: \_\_\_\_\_

Profession or occupation: \_\_\_\_\_

Have you previously applied for admission to any Shrine of the Order? \_\_\_\_\_

If so, to what Shrine? \_\_\_\_\_ When? \_\_\_\_\_

Residence Address: \_\_\_\_\_  
Street City County State Zip

Business Address: \_\_\_\_\_  
Street City County State Zip

Business Phone No. \_\_\_\_\_ Home Phone No. \_\_\_\_\_

Mail Address: \_\_\_\_\_  
Street City County State Zip

Wife's Name: \_\_\_\_\_ e-mail address: \_\_\_\_\_

Date: \_\_\_\_\_, 20 \_\_\_\_\_ Signature: \_\_\_\_\_

Print full Name here: \_\_\_\_\_  
( name in full, initials not sufficient )

Recommended and vouched for on the honor of:

Noble: \_\_\_\_\_

Noble: \_\_\_\_\_

E-Mail address \_\_\_\_\_

Do you have a motorcycle license?  Yes /  No

Do you play any musical instrument?  Yes /  No, if so, what? \_\_\_\_\_

Were you a member of the Armed Forces?  Yes /  No, if so, what branch? \_\_\_\_\_

Do you own a antique car?  Yes /  No

Do you have a desire to become a Shrine clown?  Yes /  No

Are you a license pilot?  Yes /  No

Are you a Past Master of your Lodge?  Yes /  No

Were you ever a member of any Police organization?  Yes /  No

Are you a member of the Scottish Rite?  Yes /  No

Are you a member of the York Rite?  Yes /  No

Are you a member of the Grotto?  Yes /  No

Is your spouse socially inclined?  Yes /  No

Would she consider exploring an organization that supports the Shrine Hospitals?  Yes /  No

**INSTRUCTIONS FOR THE CANDIDATE FROM THE RECORDER**

Candidates must pay full initiation fee and prorated dues, which includes Hospital assessment before being inducted to the Shrine.

<u>IF INITIATED IN</u>	<u>DUES</u>	+	<u>INITIATION FEE</u>	=	<u>TOTAL</u>
JAN, FEB, MAR	\$69.00	+	\$125.00	=	\$194.00
APR, MAY, JUN	\$54.00	+	\$125.00	=	\$179.00
JUL, AUG, SEP	\$39.00	+	\$125.00	=	\$164.00
OCT, NOV, DEC	\$24.00	+	\$125.00	=	\$149.00

**MAKE ALL CHECKS PAYABLE TO: MOHAMMED SHRINE**

4201 S. Industry RD  
Bartonville, IL 61607-2844