Pork Rite of Freemasonry of Hawaii - Petition



Q







U.S. \$190.00

Chapter of Royal Arch Masons

- **Council of Cryptic Masons**
- To the Excellent High Priest and Companions of the _____ Chapter No.__, Royal Arch Masons; To the Illustrious Master and Companions of the _____ Council No. __, Royal Arch and Select Masters; To the Eminent Commander and Sir Knights of the _____ Commandery No. __, Knights Templar.

□ To the Eminent Commander and Sir Knights of the _____Commandery No. __, Knights Templar.

I, the undersigned, respectfully submit this Application / Petition for 🗖 Affiliation; 🗖 Degrees; and 🗖 Orders.

1. I am now a member in good standing / Petitioner of:

		Lodge No	F&AM, located at	Initiation Fees	
		Chapter No	RAM, located at	Total amount -	
		Council No	R&SM, located at	check to be	
		Commandery No	KT, located at	attached.	
2.	Date of Birth:	Place of Birth:		Notes:	
3.	3. Highest Education / Military Rank:				
4.	Marital Status: (S, M, W	, D), Wife's Name			
5.	Residential Address:				
6.	Telephone(s):	E-Mail Address:			
7.	Business Address:				
8.	Occupation:		_Website (if any):		
9.	Telephone(s)		E-Mail Address:		
10.	I have \Box have never \Box	before petitioned for these deg	rees or orders and been rejected;		
11.	. I do 🗖 do not 🗖 now stand suspended or expelled from any Masonic Order.				
	If you have answered to	either question 10 or 11 affirma	tive, please explain:		

Should this Application be approved and the Petition is granted, I promise to comply with all the applicable forms, usages, customs, laws, rules, orders and regulations of the Grand York Rite Bodies of Free Masonry of the State of Hawaii and the above stated Chapter, Council and Comandery,

Date: Petitioner Full I	Name:	Signed:	
MY INTERESTS: M Items you wo	uld really enjoy!!	MASONIC HISTORY: (If	available)
Social Functions: Family D Dinners		Lodge:	No:
Degree Cast: Speaking part 🗖 Non S		ē	
Community Activities: Community N	1 0 0	Date raised:	
Leadership: Officer Line 🗖 Educatio	n 🗖 Secretarial 🗖		
Committees: Chapter 🗖 Council 🗖 🤇		Chapter:	No:
Fund Raising: Charity Function 🗖 So	ocial 🗖 Budget/Audit 🗖	Located at:	
Lodge Ambassador: Recruitment 🗖 R	Recognition 🗖 Retention 🗖	Date Exalted:	
Communications: Newsletter 🗖 Mem	ber Mail 🗖 Phone Tree 🗖		
Charity Functions: Welfare/Widows	YR Foundations	Council:	No:
I have a special interest in the Chapter	: 🗖	Located at:	
I have a special interest in the Council	: 🗖	Date Greeted:	
I have a special interest in the Comma	ndery: 🗖		
RECOMMENDED BY:		Commandery:	No:
Name		Located at:	
Address:		Date Invested:	
E-Mail:			
Signature of Sponsor:		Signature of Co-Sponsor	
	Date:		Date:
APPROVED BY MEMBERSHIP	Secretary's Signature:		Date:
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Please submit the completed Application to the Secretary of your York Rite Body or the Ambassador of your Lodge