



Application for Membership

Application for: New Member Member Reinstatement

Name: _____
First Middle Last Nickname

Spouse: _____
First Middle Last Nickname

Address: _____
Street City State Zip Code

Phone: _____
 Home Cell Work * Spouse Cell *

Check the telephone number/s you would like to receive messages regarding club activities. Do Not Call

Nobles Email: _____ Nobles Birthdate: _____

*Spouses Email: _____ *Spouses Birthdate: _____

Children & ages: _____

Employer: _____ Occupation: _____

Employer's Address: _____
Street City State Zip Code

MASONIC AFFILIATION

BLUE LODGE: _____

YORK/ SCOTTISH RITE: _____ CITY/STATE: _____

SHRINE TEMPLE: _____ MEMBER NO. _____ CITY/STATE: _____

I will abide by the Red Fez Shrine Club Rules, By-Laws and agree to be bound by the same. I further more obligate myself to the dues, initiation fees and assessments established by the Board of Directors.

Signature of applicant: _____ Date: _____

*** OPTIONAL INFORMATION**

Recommended by: _____ & _____,
Board Member

I, _____ have verified the dues cards for the above applicant and they are current.

Money Received: \$ _____ Approved by the Board of Directors (Date): _____

