

York Rite of Freemasonry of Hawaii - Petition



Chapter of Royal Arch Masons



Council of Cryptic Masons



Commandery of Knights Templar



- 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. _____

I, the undersigned, respectfully submit this Application / Petition for Affiliation; Degrees; and Orders. **U.S. \$190.00**
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1. I am now a member in good standing / Petitioner of:

_____ Lodge No. _____ F&AM, located at _____
 _____ Chapter No. _____ RAM, located at _____
 _____ Council No. _____ R&SM, located at _____
 _____ Commandery No. _____ KT, located at _____

Initiation Fees
Total amount -
check to be
attached.

2. Date of Birth: _____ Place of Birth: _____
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 have never before petitioned for these degrees 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 affirmative, please explain: _____

Notes:

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 Name: _____ Signed: _____

MY INTERESTS: <input checked="" type="checkbox"/> Items you would really enjoy!!	MASONIC HISTORY: (If available)
Social Functions: Family <input type="checkbox"/> Dinners <input type="checkbox"/> Youth Activities <input type="checkbox"/>	Lodge: _____ No: _____
Degree Cast: Speaking part <input type="checkbox"/> Non Speaking <input type="checkbox"/> Stage Crew <input type="checkbox"/>	Located at: _____
Community Activities: Community Networking <input type="checkbox"/> Other <input type="checkbox"/>	Date raised: _____
Leadership: Officer Line <input type="checkbox"/> Education <input type="checkbox"/> Secretarial <input type="checkbox"/>	
Committees: Chapter <input type="checkbox"/> Council <input type="checkbox"/> Commandery <input type="checkbox"/>	Chapter: _____ No: _____
Fund Raising: Charity Function <input type="checkbox"/> Social <input type="checkbox"/> Budget/Audit <input type="checkbox"/>	Located at: _____
Lodge Ambassador: Recruitment <input type="checkbox"/> Recognition <input type="checkbox"/> Retention <input type="checkbox"/>	Date Exalted: _____
Communications: Newsletter <input type="checkbox"/> Member Mail <input type="checkbox"/> Phone Tree <input type="checkbox"/>	
Charity Functions: Welfare/Widows <input type="checkbox"/> YR Foundations <input type="checkbox"/>	Council: _____ No: _____
I have a special interest in the Chapter: <input type="checkbox"/>	Located at: _____
I have a special interest in the Council: <input type="checkbox"/>	Date Greeted: _____
I have a special interest in the Commandery: <input type="checkbox"/>	
RECOMMENDED BY:	Commandery: _____ No: _____
Name	Located at: _____
Address:	Date Invested: _____
E-Mail:	
Signature of Sponsor: _____ Date: _____	Signature of Co-Sponsor _____ Date: _____
APPROVED BY MEMBERSHIP Secretary's Signature: _____ Date: _____	

Please submit the completed Application to the Secretary of your York Rite Body or the Ambassador of your Lodge

