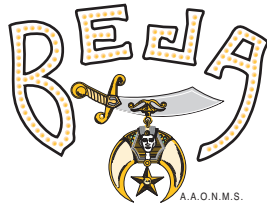


September 2011

(Recorder's Record - Leave Blank)	_____
Date Received	____/____/____
Date Elected	____/____/____
Member #	_____

CARD NUMBER _____	EXPIRATION DATE _____	SIGNATURE _____			
PRO RATA SCHEDULE OF FEES AND DUES FOR NEW MEMBERS					
IF CEREMONIAL IS BETWEEN	FEES	DUES	PER CAPITA TAX	HOSPITAL ASSESSMENT	TOTAL W/O FEZZ
January 1 - March 31	\$65	\$29	\$15	\$5	\$114
April 1 - June 30	\$65	\$22	\$15	\$5	\$107
July 1 - September 30	\$65	\$15	\$15	\$5	\$100
October 1 - December 31	\$65	\$10	\$15	\$5	\$95

PLEASE NOTE - A Beja fez can be purchased separately at the Beja Shrine Office.



**PETITION FOR INITIATION AND MEMBERSHIP
BEJA SHRINE
Ancient Arabic Order Nobles of the Mystic Shrine**

Total Cost	_____
Amount Paid	_____
Balance Due	_____

*TO THE ILLUSTRIOUS POTENTATE, OFFICERS AND NOBLES OF
BEJA SHRINE TEMPLE IN THE OASIS OF GREEN BAY, DESERT OF WISCONSIN:*

I, the undersigned, hereby declare that I am MASTER MASON in good standing in _____

Lodge # _____ F. & A. M., at _____

*Were you ever a DE MOLAY? If so, what Chapter _____ Location _____
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 six (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 Temple.*

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 Temple.

Have you previously applied for admission to any Temple of the Order? _____

If so, what Temple? _____ When? _____

*Birthplace _____, _____ (City) _____ (State) Date of Birth _____/_____/_____
(Month) (Date) (Year)*

Profession or Occupation _____ Phone # (____) _____

PLEASE CHECK (X) MAILING ADDRESS

Business Address _____ (Number and Street) _____ (City) _____ (State) _____ (Zip)

Residence Address _____ (Number and Street) _____ (City) _____ (State) _____ (Zip)

Date _____ 20 _____ Signature _____

(Name in FULL - INITIALS ARE NOT SUFFICIENT)

RECOMMENDED AND VOUCHED FOR ON THE HONOR OF

*Noble _____ (Unit/Club) _____
Print FULL NAME plainly on above line*

*Noble _____ (Unit/Club) _____
Name of Wife*

*Investigating _____

_____*

MAKE SURE THAT EVERY SPACE IS PROPERLY FILED OUT AND COMPLETE

IF ELECTED, THE SIGNING OF THIS PETITION CONSTITUTES THE SIGNING OF THE BY-LAWS OF BEJA SHRINE TEMPLE