

PETITION FOR INITIATION AND MEMBERSHIP

RAMESES SHRINERS

Ancient Arabic Order Nobles of the Mystic Shrine

3100 Keele Street, Toronto, ON M3M 2H4 Tel (416) 633-6317 Fax (416) 633-6345



PLEASE PRINT

LAST NAME _____ GIVEN NAME(S) _____
Circle name normally used

HOME ADDRESS _____
Apt # Street Address City Province Postal Code

TELEPHONE: (RES) (____) _____ (BUS) (____) _____ (FAX) (____) _____

DATE of BIRTH _____ E-MAIL _____
Month Day Year

OCCUPATION (current / former) _____ WIFE'S NAME _____
ARE YOU RETIRED YES NO

To the Illustrious Potentate, Officers and Nobles of Rameses Shrine, situated in the Oasis of Toronto, Desert of Ontario

I, THE UNDERSIGNED HEREBY DECLARE THAT I AM A MASTER MASON IN GOOD STANDING IN:

_____ LODGE NO. _____ LOCATED _____ SINCE _____

Furthermore, I do not now, and never will, hold membership in or allegiance to, any Body claiming to be Masonic that has been declared clandestine. I have resided within the jurisdiction of Rameses Shrine for not less than six months, as required by the Constitution of the Imperial Council, and that I am not under suspension in my Craft Lodge. I respectfully pray that I may be made a Noble of the Mystic Shrine and become a member of Rameses Shriners. If I be found worthy and my request granted, I promise to conform to all the Ceremonies, Engagements, Constitutions, Regulations and Edicts of the Imperial Council, together with those of Rameses Shrine.

I have previously applied to _____ Shrine on _____ (Write N/A if not applicable)
DATE

SIGNATURE _____ **DATED** _____

RECOMMENDED AND VOUCHERED FOR ON THE HONOUR OF:

NOBLE _____ ROLL # _____ SIGNATURE _____
Print full name

NOBLE _____ ROLL # _____ SIGNATURE _____
Print full name

ADDITIONAL INFORMATION:

I am a 32° degree Ancient and Accepted Scottish Rite Mason, in good standing in:

_____ CONSISTORY A. & A. S. R. Since _____
DATE

I am a Knight Templar in good standing in:

_____ PRECEPTORY, NO _____ Since _____
DATE

OFFICE USE ONLY		
PETITION RECEIVED _____	ELECTED _____	INITIATED _____
PAYMENT RECEIVED \$ _____	ON _____	ROLL # _____