

**PETITION FOR INITIATION & MEMBERSHIP
AL KADER SHRINE - 2016**



Shriners International
25100 SW Parkway Ave. Wilsonville, Or
Office 503-682-4420 Fax 503-685-5080
Email: info@alkadershriners.org

To the illustrious Potentate, Officers and Members of Al Kader Shrine, Oasis of Wilsonville: I am a Master Mason in good standing in _____ Lodge No. A. F. & A. M. and have been since (Date) _____ Address _____ City/State _____ which is 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 months, as required by the Bylaws of the Imperial Council. I respectfully pray that I may be made a Noble of the Mystic Shrine, and become a member of Al Kader Shrine. If I be found worthy and my request granted, I promise to conform to the Articles of Incorporation and Bylaws of The Imperial Council and the Bylaws and ceremonials of your Al Kader Shrine.
Have you previously applied for admission to any Shrine Center of the order? _____ Name? _____ When? _____
SIGNATURE _____ DATE _____

CANDIDATE INFORMATION

PRINT FULL NAME _____ SPOUSE NAME _____
RESIDENCE _____ CITY _____ STATE _____ ZIP _____
HOME PHONE (____) _____ FAX (____) _____ EMAIL: _____
BIRTHPLACE CITY _____ STATE _____ DATE OF BIRTH: MONTH _____ DAY _____ YEAR _____
HAT SIZE _____ PROFESSION OR OCCUPATION _____
BUSINESS ADDRESS _____ CITY _____ STATE _____ ZIP _____
BUSINESS PHONE (____) _____ FAX (____) _____ EMAIL: _____
Send Shrine mail to: Residence _____ Business _____ Are you Sr DeMolay? _____ Member of Scottish Rite? _____ York Rite _____

SPECIAL NOTE: PLEASE ATTACH A COPY OF YOUR CURRENT BLUE LODGE DUES CARD

This petition must be signed by two (2) Nobles in good standing in Al Kader Shrine

Top line signer

Noble _____ Print Name _____ Member # _____
Home Phone (____) _____ Fax (____) _____ Email _____

Second line signer

Noble _____ Print Name _____ Member # _____

Involve yourself; Get active. Join a Shrine Club or Committee. If you are interested in any of the following, please make a mark next to the group you would like to learn more about.

Patrol _____	Oriental Band _____	Legion of Honor _____	Volunteer Chaplain _____	Callipoe Corps _____
Flag Patrol _____	Ritualists _____	21-40 Club _____	Hospital Guide _____	Classic Cars _____
Greeters _____	Hospital Driver _____	Concert Band _____	Kader Klowns _____	Shrine Club in my area _____
Cyclowns _____	Motor Escort _____	Caravaners _____	Desert Patrol _____	
Shurtah (police club) _____	Hospital Support Club _____		Haunted House Club _____	Golf Tournament _____

Initiation fees, in full, must accompany Petition and may be paid by Visa, MasterCard or American Express. The special 50/50 fee is \$50*. The first year's dues will be prorated based on date of initiation. 2016 dues are \$104.00.

*Cost of Fez not included (Felt-\$140.00, Velour \$170.00, Fez Case and Accessories \$49)

Ceremonials will be held on _____

Total 50/50 Fees for initiation – Shrine Year 2016 \$50.00

_____ inal
Cold Sands initiations, please contact
The Recorder or Potentate

Enclosed is payment in the amount of \$ _____ Check No. _____

For Office Use:

Please charge my Visa/Mastercard No. _____ Exp _____

Recorders Record: Elected _____ Check \$ _____ Created _____ Member No. _____