

## PETITION FOR INITIATION AND MEMBERSHIP

## **ZELZAH SHRINE TEMPLE**



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PRINT OR TYPE NAME IN FU	LL				
Name		Spouse Name			
LAST,	FIRST	MIDDLE			
Date of Birth:	Birthplace:		Hat size:		
Mailing Address - Please u	se □Residence □Bu	isiness			
Residence Address					
	STREET		CITY	STATE	ZIP CODE
Phone:		Email:			
Profession/ Occupation:					
Business Address					
	STREET		CITY	STATE	ZIP CODE
Phone (office):		Fax:			
In	Lodg	e #	located	l at City, State	e / Province
Which is a Lodge recogn Furthermore, I have resid Shriners International. I l	nized by or in amity led at my current ad	with the Conferenc ldress for not less th	e of Grand M an 6 months	City, State Masters of Nor , as required b	e / Province th America. y the Bylaws of
membership, I promise to the Bylaws and Ceremon		ticles of Incorporati	on and Bylav	ws of the Shrii	ners International and
Signature:			Date:		<del></del>
Recommended by: (Bot	th must be member	rs of Zelzah Shrine	e)		
Noble:				No	
Noble:			Member	No	<del></del>
	eck or Credit Card Also, attach a c ke Check payable i	copy of the current	Blue Lodge	e Card.	
Credit Card #			_Exp:	CVV: _	
Signature for Credit Card	l Payment:				
*******	******	** Office Use Only	******	*****	******
Date Received:		Payment: _			
Date Voted on:		Date Initiated:			