TELE	<b>ribah Shrine</b> Member fee of \$85.00 + Annual	rship Application	
Application Date:	ication Date:Email		
Full Name:	Lady's Name:		
Address:			
			Cell:
Occupation:			
Can you take time off from work when necessary for Shrine work?			
Masonic Affiliations: Blue Lodge: Location:			on:
Can you help us out wit	h any of the followir:	ıg?	
Welding:	Painting:	Cooking:	Electrical: Other:
Do you have any impairment? Yes / No Describe:			
Reason for joining the Director's Staff:			
Signature of Applicant:_			
Sponsored By:Signature:			
Director's Staff Unit use below this line			
First Reading:			tached to application:
Membership Committee	Recommendation: A		isapproved:
Second Reading:			
Membership Vote:	Elect	Reject	Date:
President's Signature:			Date:
Secretary's Signature:			Date: