



# El Zaribah Shriners



552 North 40th Street, Phoenix, AZ 85008-6441

## PETITION FOR INITIATION AND MEMBERSHIP

TO THE POTENTATE, OFFICERS AND NOBLES OF EL ZARIBAH SHRINE  
SITUATED IN THE OASIS OF PHOENIX, DESERT OF ARIZONA,

I, the undersigned, hereby declare that I am a Master Mason in good standing in Masonic Lodge # \_\_\_\_\_  
located at City \_\_\_\_\_ State \_\_\_\_\_  
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 6 months, as required by the Bylaws of  
the Imperial Council. I respectfully pray that I may be made a Noble of Shriners International and become a  
member of your Shrine Center. If I be found worthy, and my request granted, I promise to conform to the  
Articles of Incorporation and the Bylaws and Ceremonies of your Shrine Center.

Were you ever a DeMolay? \_\_\_\_\_ If so, what was the Chapter name and location \_\_\_\_\_

Have you previously applied for admission to any organization of the shrine? \_\_\_\_\_

If so, where? \_\_\_\_\_ When? \_\_\_\_\_

Profession or occupation \_\_\_\_\_ Hat size \_\_\_\_\_

Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Birth Place \_\_\_\_\_

Print full name here \_\_\_\_\_ Wife's name \_\_\_\_\_  
(Name in full. Initials not sufficient) (if applicable)

Mailing address (street, PO Box) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ - \_\_\_\_\_

Home Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Cell Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Email address \_\_\_\_\_

Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Signature \_\_\_\_\_

Recommended and vouched for on the Honor of:

Noble \_\_\_\_\_ Noble \_\_\_\_\_

Member # \_\_\_\_\_ Tel. # \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Member # \_\_\_\_\_ Tel. # \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Send To: El Zaribah Shriners, 552 N. 40th St. Phoenix, AZ 85008 OR email to: [office@el-zaribah.org](mailto:office@el-zaribah.org)

**Shrine Initiation fee: \$325.00**

\_\_\_\_\_ Visa \_\_\_\_\_ Master Card # \_\_\_\_\_ Exp: \_\_\_\_\_ Code: \_\_\_\_\_

(This is a fillable form if downloaded and opened from your computer copy then completed and saved)