

MASONIC PETITION

TO THE WORSHIPFUL MASTER, WARDENS AND BRETHREN OF Trinity LODGE NO. 694 FREE & ACCEPTED MASONS OF ARKANSAS.

The undersigned respectfully submits the following information regarding himself as evidence of his qualifications as a candidate for (**SELECT ONE**: the symbolic degrees of MASONRY, Affiliation, Reinstatement.) **NOTE: A candidate for the symbolic degrees of Masonry must attach a certified copy of his Birth Certificate or an Affidavit of Proof of Birth.**

1. Name _____ Age _____
(please print) LAST FIRST MIDDLE
2. _____
STREET CITY STATE ZIP CODE PHONE NUMBER
3. Date of birth _____; Place of birth _____
4. How long have you lived in Arkansas ? _____ years.
5. Are you a naturalized U.S. Citizen? _____ (if yes When? _____ Where? _____)
6. What is your occupation? _____ Employer? _____
7. Are you a member or a former member of a Masonic Lodge? _____ If yes, give name, number, and address of Lodge (s)

FOR AFFILIATION SELECT ONE OF THE FOLLOWING

_____ Affiliation (Single) (Must be accompanied by a Certificate of Good Standing or a Dimit)

_____ Affiliation (Plural) (Must be accompanied by a Certificate of Good Standing)

Please give date: Initiated _____, Passed _____, Raised _____.

8. Are you married? _____ If so, give name and address of your wife, children, and dependents.

9. Have you ever been charged with a felony or other criminal offense? _____
 10. Are you directly engaged in the manufacture or sale of alcohol, drugs, or other intoxicating substances? _____
 11. Are you a member of a church? _____ Give name and location _____
 12. Will you support and defend the Constitution and Government of the United States? _____
 13. Do you firmly believe in the existence of one true God, and the immortality of the soul? _____
- (REFERENCES: Names, addresses and phone numbers to be given by petitioner. Please print.)

1. _____
2. _____
3. _____
4. _____
5. _____

I know of no legal or moral reason which should prevent me from receiving the benefits of this petition. All the statements that I made in this petition are true and correct to the best of my knowledge.
(Petitioners signature) _____

We hereby certify that we are acquainted with (Mr./Bro.) _____ and do hereby recommend him as a candidate for: (**SELECT ONE**: The symbolic degrees of Masonry, Affiliation, Reinstatement.)

Member of _____ Lodge No. _____ Signature _____

Member of _____ Lodge No. _____ Signature _____

INVESTIGATING COMMITTEE:

Bro. _____, Bro. _____, Bro. _____

(A DUPLICATE OF THIS PETITION COMPLETED TO THIS LINE WILL SERVE AS "FORM A".)

As a result of our investigation the committee is ready to report and our recommendation will be communicated to the Worshipful Master, or to the Lodge by a member of this committee. Date: _____

_____, Chairman, _____

SECRETARY OF THE LODGE PLEASE CHECK ONE OF THE FOLLOWING

- _____ Petition for Symbolic Degrees, Proof of Birth attached.
_____ Petition for Affiliation (Single) , Certificate of Good Standing or Dimit attached.
_____ Petition for Affiliation (Plural), Certificate of Good Standing attached.

Date Read at Stated Communication: _____.