



MEMBERSHIP APPLICATION

(PETITION)

An Organization for Young Men

1. Name: _____ 2. Date: _____

3. Address: _____

4. City: _____ 5. State & Zip: _____

6. Phone: () _____ 7. Birthdate: _____

8. School Attending: _____ 9. Grade: _____

10. Favorite School Subject(s): _____

11. Hobbies/Interests: _____

12. Clubs, Organizations: _____

13. Church/Synagogue: _____

14. References: List 3 friends (your age) you have known for one year.

Name: _____ Address: _____ Phone: _____

Name: _____ Address: _____ Phone: _____

Name: _____ Address: _____ Phone: _____

My Parents/Guardians approve of my joining DeMolay.

15. Father's Name: _____ 16. Mother's Name: _____

17. Is your father a Senior DeMolay? _____ If so, where? _____

18. Is your father a Mason? _____ If so, where? _____

19. Parent/Guardian Signature: _____

20. Applicant's Signature: _____

21. DeMolay Sponsor's Name and Signature: _____

21B. Second DeMolay Sponsor's Name and Signature: _____

22. Masonic Sponsor's Name and Signature: _____

Your Life Membership Fee of: _____ must accompany this application.