



Petition for Affiliation Membership In Zelzah Shrine



2313 S. Eastern Ave., Las Vegas, NV 89104
Phone: 702-382-5554 – Fax: 702-382-2612
www.zelzahshrine.org

Date _____ 20____

PRINT OR TYPE NAME IN FULL

Name: _____ Spouse Name: _____
LAST FIRST MI

Date of Birth: _____ Birthplace: _____ Hat size: _____

Mailing Address – Please use Residence Business

Residence Address _____
ADDRESS CITY STATE ZIP

Phone: _____ Email: _____

Profession / Occupation: _____

Business Address: _____
ADDRESS CITY STATE ZIP

Phone (office): _____ Fax: _____

P.C.M. (yes) – (no) Purchase thru: _____ Shrine Date: _____

To the Potentate, Officers and Nobles of Zelzah Shrine, situated in the Oasis of Las Vegas, Desert of Nevada.

I declare that I have reside within the jurisdiction of Zelzah Shriners for not less than (6) months, as required by the Bylaws of Shriners International. I promise to conform to the Bylaws and Ceremonies of Zelzah Shriners. I, the undersigned, A member and Noble of the Shrine.

In _____ Temple, located at _____.

Being eligible under 323.10 (a) for demit, respectfully pray that I may be admitted as an Affiliate Member of your temple.

I furthermore state that I have not been suspended or expelled as a master mason and am a member in good standing in _____ Lodge No. _____ in the city of _____ State _____.

Have you previously applied for admission to this temple? Yes No If yes, when? _____.

Signature: _____ Date: _____

Recommended by: (Both must be members of Zelzah Shrine)

Noble: _____ Member No. _____

Noble: _____ Member No. _____

If elected the signing of this petition constitutes the signing of the By-Laws of Zelzah Shrine.

Attach a copy of your current Shrine Card or Demit Certificate and your Blue Lodge Card

*****OFFICE USE ONLY*****

Date Received: _____ Ck # _____ C.C. / Cash Payment of: \$ _____ Demit Certificate

Date Voted on: _____ Date Affiliated: _____ Shrine Card Blue Lodge Card

Application for Demit

To the Recorder of _____ Shriners Date _____

Having made my home in the jurisdiction of Zelzah Shriners, I request that a Demit be issued to me in order that I may affiliate with them. Name: _____ Member # _____

My old address was: _____

My current address is: _____

Please mail Demit directly to the Recorder at: Zelzah Shriners

2313 S. Eastern Ave

Las Vegas NV 89104

702-382-5554 Fax – 702-382-2612

Recorder's Signature

Application Signature