CHAPTER APPLICATION FOR AFFILIATION

To the High Priest, King, S	cribes and Comp	anions of	
	C	Chapter No	_ R.A.M.
The undersigned a	Mason, late member of Chapter No.		
, under the jurisdiction of the M.E. Grand Chapter of, respectful			
applies for affiliation in you			
I have resided at the fo	ollowing places fo	or the time stated sir	ice my dimit / certificate of good
standing was granted:			
My business address is			
			01-1-
			State
			after application has been made
and rejected, state when a		ter).	
Email:		(Signature of Applicant) F	ull Name required
Phone Number:		Printed Name	
Recommended by:			
Signature		Printed Name	
Signature		Printed Name	
Dated:	, 20		
To the High Priest, King, S	Scribe and Compa	nions of	
		Chapter No.	, R.A.M.
			a strict and careful examination
			e deem it our duty to report
Favorably l			- accimic can acci, to repent
avoidally	Committee	Members:	
	•		
Signature		Printed Name	
Signature		Printed Name	
Signature		Printed Name	