

(Office Use Only)

MEMBER NO. _____

PETITION OF

(please print)



1533 Hamilton Street
Allentown, PA 18102-4205

Phone: 610-433-3232
Fax: 610-433-4943
Toll Free Phone: 866-239-3472
E-mail: lehighcons@enter.net
Website: <http://www.mastermson.com/valley-of-allentown>

Date Received

Blue Lodge Number

Initiated Lodge

Initiated Council

Initiated Chapter

Initiated Consistory

Deposit/Check # \$..... /
.....

Balance Paid/Check # \$..... /
.....

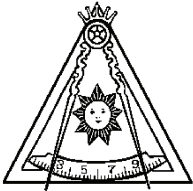
Total Paid/Check # \$..... /
.....

Folio Number

ANCIENT ACCEPTED SCOTTISH
RITE OF FREEMASONRY

“VALLEY OF ALLENTOWN”

ANCIENT ACCEPTED SCOTTISH RITE OF FREEMASONRY
NORTHERN MASONIC JURISDICTION—UNITED STATES OF AMERICA



To The Officers And Members Of
MUHLBERG LODGE OF PERFECTION, 14°
LAFAYETTE COUNCIL PRINCES OF JERUSALEM, 16°
BETHLEHEM CHAPTER OF ROSE CROIX, 18°
LEHIGH CONSISTORY, S.P.R.:S., 32°
 The Scottish Rite Bodies Sitting in The Valley of Allentown,
 Scottish Rite Cathedral, 1533 Hamilton St., Allentown, Pennsylvania 18102



_____ Date

I, the undersigned hereof, respectfully show that I am desirous of being admitted as a member of your honorable Bodies, and request that I may be received among you, and that I will ever pray for the prosperity and glory of the Fraternity and the welfare of the Brethren.

In making this application I promise on my word of honor that should I be accepted and become a member of your honorable Bodies, I subscribe to the following Oath of Fealty: I, the undersigned, do hereby promise on my word of honor, and swear true faith, allegiance, and fealty to the Supreme Council of Sovereign Grand Inspectors General of the Thirty-third and Last Degree of the Ancient Accepted Scottish Rite of Freemasonry for the Northern Masonic Jurisdiction of the United States of America, sitting at its Grand East in the Town of Lexington, Massachusetts, and will support and abide by its Constitutions, Orders and Decrees. That I will hold allegiance to the said Supreme Council and be loyal thereto, as the supreme authority of the Rite; will hold illegal and spurious every other Body that may be established within its jurisdiction, claiming to be a Supreme Council; and every other Body of said Rite within the same Jurisdiction that does not hold its powers from said Supreme Council and will hold no communication whatever in Scottish Rite Masonry with any member of the same nor allow him to visit any Body of the Rite of which I may be a member; and I will dispense justice to my brethren according to the laws of equity and honor.

And should I violate this, my solemn vow and pledge, I consent to be expelled from Scottish Rite Masonry and all rights therein and in any Body of the Rite, and be denounced to every Body of the Ancient Accepted Scottish Rite in the world as a traitor and forsworn.

And may God aid me to keep and perform the same. Amen.

Date of Birth _____ Place of Birth _____
(month/day/year) (City, State, Country)

Residence _____ Since _____
(number and street) (year)

City _____ County _____ State _____ Zip _____ - _____

Home Telephone _____ Cell Phone: _____ E-mail _____

Immediately previous to above address, I resided at (Give residence for at least one year) _____

Occupation _____ Employer _____
(Give Title or Name of position or state nature of duties) (If retired, give previous employer's name)

Business Address _____ Business Telephone () _____
(Name and address)

Have you ever petitioned for Scottish Rite Degrees? _____ If "yes" in what Valley? _____

What disposition was made of the petition? _____

I was raised a Master Mason in _____, Lodge No. _____, F. & A.M. located at _____
(city, state)

on _____, I am now a member of _____, Lodge No. _____ located at _____
(Month, Day, Year) (city, state)

APPLICANT'S NAME IN FULL - NO INITIALS - NO ABBREVIATIONS
(If you have no middle name, state "nmi")

SIGNATURE _____

PRINT: _____

DATE _____

WE HEREBY CERTIFY THAT WE HAVE EXAMINED THE CURRENT SYMBOLIC LODGE DUES CARD OF THE ABOVE PETITIONER

Recommender Please Sign First or Middle Name in Full Please print your name Supreme Council No. Lodge No. Phone No. (area code)

Recommender Please Sign First or Middle Name in Full Please print your name Supreme Council No. Lodge No. Phone No. (area code)

INITIATION FEES \$ 200.00
At least \$50.00 must accompany this Petition

MAKE CHECKS PAYABLE TO: LEHIGH CONSISTORY
ALL QUESTIONS MUST BE ANSWERED IN FULL
 Updated: 02/19/2009



NO INITIALS—NO ABBREVIATIONS (IF YOU HAVE NO MIDDLE NAME, STATE "NMN")

LAST

MIDDLE

FIRST

PRINT FULL NAME