COMMITTED NOW SA		ION AND MEM	BERSHIF	
		02, Grand Rapids, MI 495 om - (616) 942-1570	503	
To The Potentate, Office	rs and No	bles of Saladin	SHRINERS,	Situated
in the City of Grand Rapids, State of Michigan.				
I, the undersigned, hereby declare that I am a Master Mason in				Lodge
No Located at(city)				
which meets the recognition standards of the Conference of Grand Masters in North America, Interamerican Masonic Confederation or the World Conference of Grand Lodges. Furthermore, I have resided at my current address for not less than 6 months, as required by the Bylaws of Shriners International. I hereby make application to become a Noble of the Order and a member of your temple. If granted membership, I promise to conform to the Articles of Incorporation and Bylaws of Shriners International and the Bylaws and Ceremonies of your temple.				
Have you previously applied for admission to any temple of the Order?  Yes  No				
If yes, what temple?		When?		
Were you ever a DeMolay? 🗖 Yes 📮 No				
If yes, what Chapter? (name and location)				
Profession / Occupation				
Employer		Phone		
Birthplace		Date of Birth		
Residence				
Number and Street	County	City	State	Zip
Phone	Ema	.il		
Business				
Number and Street	County	City	State	Zip
Phone	Ema	.il		
Mailing address - Please use Residence Bu	siness			
Name of Spouse / Lady				
Date, 20 Signature				
Print Full Name				
Recommended By:				
Noble		Мемвег No		
Noble		Мемвеr No		
Fez Size Method of	payment			

Creation Fee With Fez -  $290\,$  / Creation Fee with Candidate or Club providing Fez -  $150\,$ 

## **Background Information**

All petitioners must complete this portion of the application in full. The Nobility of Saladin Shriners will be made aware of any petitioner refusing to complete the entire petition prior to the time it is balloted on.

Have you ever been convicted of a felony or misdemeanor?

**Y**es

🗖 No

Ever granted a diversion / deferred prosecution?

**U** Yes

🗆 No

If you answered yes to either question list the year, charge, city & state as well as the result:

By signing this consent form, I acknowledge that I will be subject to a comprehensive criminal background check and I authorize Shriners International, its members, employees, agents and assigns, as well as the temple to which I submit this petition, its members, employees, agents and assigns to investigate my background. I understand that this investigation will be used to determine my suitability for membership in the Shrine fraternity, and in exchange for consideration of membership, I consent to this background investigation and agree to hold harmless Shriners International, its members, employees, agents and assigns, as well as the temple to which I submit this petition, its members, employees, agents and assigns, from any and all claims, damages, liabilities, costs, expenses, or any other action arising from searching for, retrieving, or reviewing any information obtained, and further that I hereby waive my right to bring any cause of action against the temple, its officers, members or Shriners International, its officers or members, for defamation, invasion of privacy, or any other cause of action arising from their investigation and/or decision.

Date \_\_\_\_\_, 20 \_\_\_\_\_ Signature \_\_\_\_\_

Print Full Name \_\_\_\_\_