

APPLICANT FOR TRANSFER OF MEMBERSHIP

(Appropriate box at top of form (reverse side) **MUST** be checked)

THIS APPLICATION MUST BE ACCOMPANIED BY:

- A. For a member of a Hawaii Lodge, **either**
 - 1. A dimit from a recognized Lodge of **this** Grand Jurisdiction **or**
 - 2. A receipt showing dues paid at least through the end of the current calendar year and beyond that when this application will be read in Lodge, together with a completed "Request for Demit" form. (If Plural Membership box is checked, no "Request for Dimit" is necessary) and
 - 3. A check for the affiliation fee in the amount of \$60.00.
- B. For a member of a Lodge in **another** Grand Jurisdiction, **either**
 - 1. A dimit from a recognized Lodge of that Grand Jurisdiction, or
 - 2. A certification that a dimit will be issued on notification of election to membership, (if Dual Membership is checked, no certification is necessary), or a "Certificate of Standing" in his Lodge **and**
 - 3. A check for the affiliation fee in the amount of \$60.00.

APPLICANT FOR MULTIPLE MEMBERSHIP

(Appropriate box at top of form (reverse side) **MUST** be checked)

PLURAL – Membership in two or more Lodges in this Grand Jurisdiction only.

DUAL – Membership in one or more Lodges in this Grand Jurisdiction **and** in one or more Lodges of another Grand Jurisdiction.

- A. Applicant does not have to attach a dimit or arrange for the issuance of a dimit. He **must** check the appropriate box at the top of this application form.
- B. If Plural Membership box is checked, he must attach a receipt showing his dues are paid at least through the end of the current calendar year and beyond that when this application will be read in Lodge.
- C. If Dual Membership box is checked, he must attach a "Certificate or Letter of Standing" from his current Lodge.

APPLICATION FOR AFFILIATION

(Please complete in YOUR OWN HANDWRITING)

ONE OF THESE BOXES MUST BE CHECKED	TRANSFER OF MEMBERSHIP	PLURAL MEMBERSHIP	DUAL MEMBE	RSHIP		
To the Master, Wardens and HONOLULU LODGE, FRI I respectfully represent that I am a Mast Master Masons, and I hereby make app 1. State your full name:	EE & ACCEPTED Iter Mason in good standing.	, that I do not stand suspe molulu Lodge.				
2. I was raised in:	(Please printLo					
under the jurisdiction of the C	-					
on the day and since my raising I have a Lodge:	lso affiliated with the f	following Lodges:				
	· · · · · · · · · · · · · · · · · · ·					
3. I am now a member in good under the jurisdiction of the (If you are a member of more the	Grand Lodge of:					
4. If you have already honorably a valid demit issued by that Lod form. State the name, number an	ge or its Grand Lodge,	such a dimit must b ction to which you b	e attached to this pelonged.	application		
under the jurisdiction of the O	Grand Lodge of:					
5. Where were you born?	City	State	Country			
on the day of _				·		
6. State explicity your business		Month Year				
7. Where do you reside?	mber Street		City			
Telephone			City	Zip 		

8. Your busin	ness address?				
	Numb	er	Street	City	Zip
9. Your Soci	al Security Number	?			
10. If my app	olication for affiliation	n is aţ	oproved, I wish to	Check box which applies)	
	Terminate my me	mbers	hip in my present I	Lodge	
			n my present Lodge or more Hawaii Lodges)	e and hold plural members	ship
			n my present Lodge Lodges and one or more I	e and hold dual membersh Lodges outside of Hawaii)	ip
other Lodge, of members to members to members to mealth back known or unk present or futt and free from legal proceeding laws.	or any person requesting the any investigation of the arrows and the arrows to me, and the arrows in connection any liability any and arrows, rights and remediates.	ted to on into idersta t I wai on with d all Lo edies w	do so by the above my past personal h and that this proced- ive all rights and re h or relating to this odges, members of which may otherwis	referred to Lodges or the referred to Lodges or the referred to Lodges or the restory, my character record ure may entail the contact medies which may be extended by the procedure. I further agree Lodges, and persons refer to be available to me under foregoing statement.	ir investigating rds, financial records ing of persons, either ended to me under e to hold harmless rred to above from al
-	•		•		
Dated		_ 51g1	nature(Si	ign all names in full)	
Recommende	ed by:				
y		vledge	of him, I have stro	known the above applicaning reasons to believe that	
Printed name:			Signe	d:	
Residence add	dress:			d: Phone:	
Recommend	ed by:				
y	ears. From my know	vledge	of him, I have stro	known the above applicaning reasons to believe that	
	nor on our ancient Ir			d.	
	dress:		signe	d: Phone:	
residence and	ω± ♥∪∪ •			1 110110.	

TO BE FILLED IN BY THE SECRETARY	TO BE FILLED IN BY THE SECRETARY		
Name:			
SSN:	Full Name of Applicant		
Application received:			
Application accepted:	Date When Born		
Application rejected:			
Notified:	-		
Initiated:	Where Born		
1 st degree exam:			
Passed:	Residence Address		
2 nd degree exam:	Residence Address		
Raised:			
3 rd degree exam:	Business or Occupation		
Carded:			
Mailing List:			
PAYMENT REQUIRED WITH APPLICATION Fees for Degrees\$20.00 Fees forGrand Lodge\$40.00			
T	Recommended by:		
Total\$60.00	1.		
The above total must be paid with this application. Checks payable to: Honolulu Lodge, F & A M	2.		
Return Application to a Brother of Honolulu Lodge or mail to: Worshipful Master	Remarks:		
Honolulu Lodge, F & AM			
1227 Makiki St.			
Honolulu, HI 96814-1332			
Visit our Web Site at:	-		
www.mastermason.com/honolulu	-		