

Petition for the Degrees of Masonry



To the Worshipful Master, Wardens and Brethren of
Evansville Lodge No. 64, F. & A. M. Evansville, Indiana

(PRINT FULL NAME) _____ respectfully represents that having long entertained a favorable opinion of your ancient Institution and having a belief in God, he is desirous of being admitted a member thereof if found worthy. He was born on the _____ day of _____, 19____, at _____, State of _____. He has resided within the jurisdiction of your Lodge for the period of _____ years and _____ months next preceding the date of this petition. He has not been rejected by any other Masonic Lodge within the period of one year. The character of the business in which he is engaged as proprietor or employee is _____

Recommended by Brother _____ who has known petitioner _____ years,
and Brother _____ who has known petitioner _____ years.

Name _____ List places of employment for the past 10 years: _____

Address _____

Hm Ph(____) _____ Off Ph(____) _____ Present Occupation? _____

Age _____ Email _____ Name of firm _____

Served in armed forces? _____ Branch? _____ Address _____

Father's name _____ City, State, Zip _____

Father's address _____ Have you ever been denied membership in, or withdrawn your petition to, or

City, State, Zip _____ suspended or expelled from any fraternal organization? _____

Is (or was) your father a Mason? _____ Lodge Number _____ Give particulars _____

Lodge Name _____ Give names and phone numbers of three business or professional references

Lodge address _____ other than those who signed this petition: _____

City, State, Zip _____

Any Brother's Masons? _____

If so give their names, addresses, and the names and location of their lodges. _____

_____ Do you have any physical impairment? _____

_____ If so describe _____

_____ Have you ever been convicted of a criminal offense (minor traffic violations

excluded) in a court of competent jurisdiction? _____

_____ If so give particulars: _____

_____ Presented Date ____/____/____ Referred to the following Committee: _____

Address's of where you lived the past 10 years: _____

_____ Signature _____

_____ Printed: _____ Date ____/____/____

_____ Mentor Name: _____

_____ Disposition: Elected Date ____/____/____ E.A. Date ____/____/____

_____ F.C. Date ____/____/____ M.M. Date ____/____/____

_____ Rejected Date ____/____/____

Use back of form to provide additional information when necessary.