

★ ★ ★ ★ ★
DEMOLAY
INTERNATIONAL
MEMBERSHIP APPLICATION

1. First Name: _____ Middle: _____ Last: _____

2. Preferred Name: _____

3. Address: _____

4. Country: _____ 5. City/Province _____ 6. Postal Code: _____

7. Phone: () _____ 8. Birthdate: _____

9. E-mail: _____

10. School Attending: _____ 11. Grade: _____

12. Favorite School Subject(s): _____

13. Hobbies/Interests: _____

14. Clubs, Organizations: _____

15. Church/Place of Worship: _____

16. References: List 2 friends (your age) you have known for one year:

Name: _____ Email: _____ Phone: () _____

Name: _____ Email: _____ Phone: () _____

My Parents/Guardians approve of my joining DeMolay.

17. Parent/Guardian Name: _____ Parent/Guardian Name: _____

18. Is your parent/guardian a Senior DeMolay? _____ If so, where? _____

19. Is your parent/guardian a Mason? _____ If so, where? _____

By signing this petition, you are hereby agreeing to join DeMolay, and live by the virtues and precepts of love for parents, belief in a higher power, courtesy, comradeship, fidelity, cleanness, and patriotism.

20. DeMolay Sponsor ID: _____ DeMolay Sponsor's Name: _____

DeMolay Sponsor Signature: _____

Parent/Guardian Signature: _____

Applicant Signature: _____

Your Life Membership Fee of: **\$100** must accompany this application.