

Membership Information

Chapter name and number _____

Name of member _____

Enter information here for New Initiate

Address: _____

Initiation date _____ Spouse _____

Masonic affiliation (Name): _____

Relationship _____ Lodge _____

Enter information here for New Affiliate

Address: _____

Affiliation date: _____ via

_____ Demit from _____ (chapter name) **OR**

_____ Dual from _____ (chapter name) **OR**

_____ Transfer from _____ (chapter name)

Enter information here for Other membership changes

Demitted _____ (date)

Deceased _____ (date)

Reinstated _____ (date)

Suspended _____ (date)

Name change: from _____ to _____

Additional information _____
