



Send application to:
RECORDER
 NUR Shrine A.A.O.N.M.S.
 P.O. Box 10085
 Wilmington, DE 19850-0085
 Phone 302-328-6100

This application, properly signed must be in the hands of the Recorder at least one week before date of Ceremonial.

STATE SIZE OF FEZ HERE _____

**Use typewriter if possible.
 See that each blank is filled out.
 Mail petition promptly with check.**

**Make checks payable to:
 NUR SHRINE
 Amount paid with application: \$ _____**

FOR RECORDER'S USE ONLY

Initiation Fee _____
 Hospital Assessment _____
 Dues _____
 Fez _____
 Total _____
 Paid _____
 Balance _____

 Typewrite or Print Full Name Here -- NO INITIALS

Created _____
 Elected _____
 Shrine No. _____

PETITION FOR INITIATION AND MEMBERSHIP NUR SHRINE WILMINGTON, DELAWARE

TO THE ILLUSTRIOUS POTENTATE, OFFICERS AND NOBLES OF NUR SHRINE, WILMINGTON, DELAWARE:

I, the undersigned, hereby declare that I am a Master Mason in good standing in _____ Lodge # _____ located at _____ (City), _____ (State). I held the office of _____ in _____ for the year of _____. I have resided within the jurisdiction of your Shrine for not less than 6 months and I am not under suspension or expulsion from a Masonic Lodge. I respectfully pray that I may be made a Noble of the Mystic Shrine and become a member of your Shrine.

If I be found worthy, and my request granted, I promise to conform to the Ceremonies, Engagements, Constitutions, Regulations and Edicts of The Imperial Council, together with those of your Shrine.

Birthplace _____ Date of Birth _____

Married? _____ Wife's Name _____

Were you ever a DeMolay? _____ If so, what was the Chapter name and location? _____

Profession or occupation _____ If retired, past occupation _____

Have you previously applied for admission to any Shrine of the Order? _____

If so, what Shrine? _____ When? _____

Residence Address: _____

Street _____ City _____

County _____ State _____ Zip _____ Phone _____

Business Address: _____

Street _____ City _____

County _____ State _____ Zip _____ Phone _____

E-mail Address: _____

Date _____, 20____ Signature _____

Recommended and Vouched for on the Honor of:

Noble _____ Shrine No. _____

Noble _____ Shrine No. _____

This Application is VOID unless signed by the applicant.

NUR SHRINE, A.A.O.N.M.S.
P.O. Box 10085
Wilmington, Delaware 19850-0085

WELCOME TO A UNIT OR CLUB OF YOUR CHOICE.

INDICATE WHICH OF THE FOLLOWING UNITS AND CLUBS YOU WOULD LIKE TO JOIN.

UNITS

- ___ **Clowns**
(Have an interest in Clowning)
- ___ **Director's Staff**
(2nd Section Activity)
- ___ **Fife & Drum**
(No musical knowledge required)
- ___ **Legion of Honor**
(Are you an Ex-military Person?)
- ___ **MC - Easy Riders** (Golf Carts)
(Have an interest in parading)
- ___ **MC - Mini-Corvettes**
(Have an interest in parading)
- ___ **Oriental Band**
(No musical knowledge required)
- ___ **Patrol**
(Have an interest in drilling)
- ___ **Provost Guard**
(Shrine police)
- ___ **Ritual**
(Would you like to be in a Ceremonial?)

CLUBS

- ___ **GEMS**
(Club of retirees)
- ___ **Golf Club**
(Have an interest in golf)
- ___ **Highlanders**
(No musical knowledge required)
- ___ **Hillbilly Clan 173**
(Casual dress & fun for guys and gals)
- ___ **Lower DE Shrine Club**
(Southern Delaware area)
- ___ **Mini-Choppers**
(Have an interest in mini-motorcycles)
- ___ **Shepherds**
(Transport children to Shriners Hospital)
- ___ **Shrine Club of DE**
(Northern Delaware area)
- ___ **Vagabonds RV**
(Interest in camping)
- ___ **Yacht Club**
(Have an interest in boating)