

CHAPTER USE ONLY

Received _____
Read _____
Voted _____
Init. Degree _____
DM Degree _____

Texas Hill Country CHAPTER



MEMBERSHIP APPLICATION

An Organization for Young Men

- 1. Name: _____ 2. Date: _____
- 3. Address: _____ 4. City: _____ 5. State & Zip _____
- 6. Phone: () _____ 7. Birth Date (MM/DD/YY) _____
- 8. Email address: _____ @ _____
- 9. School Attending: _____ 10. Grade: _____
- 11. Favorite School Subject(s): _____

- 12. Hobbies: _____

- 13. Clubs, Organizations: _____

- 14. Church/Synagogue: _____
- 15. References: List 3 friends (your age) you have known for one year.
Name: _____ Address: _____ Phone: _____

Name: _____ Address: _____ Phone: _____

Name: _____ Address: _____ Phone: _____

My Parents/Guardians approve of my joining DeMolay.

- 16. Father's Name: _____ 17. Mother's Name: _____
- 18. Is your father a Senior DeMolay? _____ If so, where? _____
- 19. Is your father a Mason? _____ If so, where? _____
- 20. Parent/Guardian Signature: _____
- 21. Applicant's Signature: _____
- 22. DeMolay Sponsor's Name and Signature: _____
- 22B. Second DeMolay Sponsor's Name and Signature: _____
- 23. Masonic Sponsor's Name and Signature: _____

Your Life Membership Fee of: \$100.00 must accompany this application



