

★ ★ ★ ★ ★
DEMOLAY
INTERNATIONAL
MEMBERSHIP APPLICATION

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

2. Preferred Name: _____

3. Address: _____

4. City: _____ 5. State & Zip: _____

6. Phone: (____) _____ 7. Birthdate: _____

8. Email: _____

9. School Attending: _____ 10. Grade: _____

11. Favorite School Subject(s): _____

12. Hobbies/Interests: _____

13. Clubs/Organizations: _____

14. Church/Place of Worship: _____

15. 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.

16. Parent/Guardian Name: _____ Parent/Guardian Name: _____

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

18. 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.

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

DeMolay Sponsor Signature (First Line Signer): _____

Parent/Guardian Signature: _____

Applicant Signature: _____

Your Life Membership Fee of: _____ must accompany this application.