

# Petition for the Degrees of Masonry

## INDIANA

To the Worshipful Master, Wardens and Brethren of

Mystic Tie \_\_\_\_\_ Lodge No. 398, J. & A. M. \_\_\_\_\_ Indianapolis \_\_\_\_\_, Indiana

(PRINT FULL NAME) \_\_\_\_\_ respectfully represents that having long entertained a favorable opinion of your ancient Institution and having a belief in God, he is desirous of being admitted a member thereof if found worthy. He was born on the \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_, at \_\_\_\_\_, State of \_\_\_\_\_. He has resided within the jurisdiction of your Lodge for the period of \_\_\_\_\_ years and \_\_\_\_\_ months next preceding the date of this petition. He has not been rejected by any other Masonic Lodge within the period of one year. The character of the business in which he is engaged as proprietor or employee is \_\_\_\_\_

Recommended by Brother \_\_\_\_\_ who has known petitioner \_\_\_\_\_ years,  
and Brother \_\_\_\_\_ who has known petitioner \_\_\_\_\_ years.

Name \_\_\_\_\_ List places of employment for the past 10 years: \_\_\_\_\_

Address \_\_\_\_\_

Hm Ph(\_\_\_\_) \_\_\_\_\_ Off Ph(\_\_\_\_) \_\_\_\_\_ Present Occupation? \_\_\_\_\_

Age \_\_\_\_\_ Email \_\_\_\_\_ Name of firm \_\_\_\_\_

Served in armed forces? \_\_\_\_\_ Branch? \_\_\_\_\_ Address \_\_\_\_\_

Father's name \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Father's address \_\_\_\_\_ Have you ever been denied membership in, or withdrawn your petition to, or

City, State, Zip \_\_\_\_\_ suspended or expelled from any fraternal organization? \_\_\_\_\_

Is (or was) your father a Mason? \_\_\_\_\_ Lodge Number \_\_\_\_\_ Give particulars \_\_\_\_\_

Lodge Name \_\_\_\_\_ Give names and phone numbers of three business or professional references

Lodge address \_\_\_\_\_ other than those who signed this petition: \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Any Brother's Masons? \_\_\_\_\_

If so give their names, addresses, and the names and location of their

lodges. \_\_\_\_\_ Do you have any physical impairment? \_\_\_\_\_

\_\_\_\_\_ If so describe \_\_\_\_\_

\_\_\_\_\_ Have you ever been convicted of a criminal offense (minor traffic violations

Are you married? \_\_\_\_\_ If so, date \_\_\_\_\_ excluded) in a court of competent jurisdiction? \_\_\_\_\_

Spouse's full name \_\_\_\_\_ If so give particulars: \_\_\_\_\_

Place of marriage \_\_\_\_\_ Presented Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Referred to the following Committee:

When and where did you last vote in a national election? \_\_\_\_\_

\_\_\_\_\_

Address's of where you lived the past 10 years: \_\_\_\_\_

\_\_\_\_\_ Signature \_\_\_\_\_

\_\_\_\_\_ Printed: \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_ Mentor Name: \_\_\_\_\_

\_\_\_\_\_ Disposition: Elected Date \_\_\_\_/\_\_\_\_/\_\_\_\_ E.A. Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Use back of form to provide additional information when necessary. F.C. Date \_\_\_\_/\_\_\_\_/\_\_\_\_ M.M. Date \_\_\_\_/\_\_\_\_/\_\_\_\_

REV 2 DECEMBER 2005 tryfreemasonry.com Rejected Date \_\_\_\_/\_\_\_\_/\_\_\_\_