



PETITION FOR AFFILIATION 2020 AINAD SHRINERS

609 St. Louis Avenue; East St. Louis, IL 62201-2927
(618) 874-1870 FAX (618)874-6920
AINADSHRINERS.ORG



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To The Potentate, Officers and Nobles of Ainad Shriners:

I, the undersigned, a Noble of the Order, initiated in _____ Shriners,
located at _____ on _____ (date)
And last a member of _____ Shriners,
located at _____ which has granted the attached
certificate of Demit, respectfully pray that I may be admitted a member of your Temple.
I furthermore State that I have resided at my current address for not less than six
months, as required by the by-laws of Shriners International. I furthermore declare that
I am a Master Mason in good standing or have otherwise met the prerequisites for
membership under the by-laws of Shriners International.

(Name of Lodge) _____ Lodge # _____

located at _____,
City State

Name _____
(Print Full Name)

Residence _____

Home Phone (_____) _____ Street City State Zip
Cell Phone (_____) _____

Occupation: _____ Work Phone (_____) _____

Birthplace _____
(Date of Birth)

Email: _____

Lady's Name: _____ Cell Phone (_____) _____

Lady's Email: _____

Signature: _____ Date _____
(Name in Full, initials not sufficient)

Recommended By:
Noble (PRINT Name): _____ Member # _____

Noble (PRINT Name): _____ Member # _____

OFFICE: Expected date of Entry: ____/____/____
Date of Shrine Receipt: ____/____/____ Amount Received \$ _____

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(Name of Lodge) _____ Lodge # _____

located at _____,
City State

Name _____
(Print Full Name)

Residence _____

Home Phone (_____) _____ Street City State Zip
Cell Phone (_____) _____

Occupation: _____ Work Phone (_____) _____

Birthplace _____
(Date of Birth)

Email: _____

Lady's Name: _____ Cell Phone (_____) _____

Lady's Email: _____

Signature: _____ Date _____
(Name in Full, initials not sufficient)

Recommended By:
Noble (PRINT Name): _____ Member # _____

Noble (PRINT Name): _____ Member # _____

OFFICE: Expected date of Entry: ____/____/____
Date of Shrine Receipt: ____/____/____ Amount Received \$ _____

2020 AINAD SHRINERS AFFILIATION INSTRUCTION & FEES

To affiliate with the Ainad Shriners you must do the following:

Complete the information on the other side
Provide your Demit from issuing Shrine Temple
Pay current dues of (\$105.00)
Provide a copy of current years Masonic Lodge dues card at the time of affiliation.

We accept MasterCard, Visa, American Express and Discover credit cards

Payment Method*: Check# _____ CC _____ Cash _____

Credit Card #: _____

Exp. Date: ____/____/____ VIN Code _____ (3 digit code on back of card)

Name on Card _____

Signature: _____

Date: _____

Mail this form with the Demit and copy of current Masonic Lodge Dues card to:

Ainad Shriners
ATTN: Membership
609 St. Louis Ave.
East St. Louis, IL 62201-2927

If you have questions, contact Ainad Shriners office at 618-874-1870. Go to www.ainadshriners.org for more information.

*Please do not send cash through the mail. Thank You.

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