

Petition for Plural Memberships, Affiliation or Reinstatement

_____ 20_____
(Date)

To the Worthy Matron, Officers, and Members of _____ Chapter No. _____ O.E.S.

I, _____ currently (or formerly) a member of _____ Chapter(s)
(Petitioner's Full Legal Name)

No. (s). _____ O.E.S. at _____ do hereby:
(Address, City, Zip Code and State)

Petition for Plural Membership

The following is understood:

- ✓ A complete list of Chapters that the petitioner belongs to and a Certificate in Good Standing from each Chapter must accompany this Petition and be affixed with the Seal of each Chapter before being sent to the Grand Secretary for verification. (Cons/bylaws, Article XVI, Section 1601, paragraph 4.)
- ✓ A petition for Dual/Plural Membership must be certified by the Grand Secretary before being read in Chapter. (Cons/bylaws, Article XVI, Section 1601, paragraph 4)
- ✓ A fee of \$_____ accompany any petition from a foreign jurisdiction, to be retained by the chapter. (A foreign jurisdiction is any jurisdiction other than Washington State)

Certification of the Grand Secretary

By the authority vested in me and under the seal of the Grand Chapter, I hereby certify the above named petitioner as a member in good standing and authorize them for Plural Membership.

(Grand Secretary's Signature)

(Date)

Petition for Affiliation

Petition for Reinstatement

One of the following accompanies this petition:

- Demit
- Transfer Certificate
- Certificate of Good Standing
- Payment of Indebtedness Certificate

The following is understood:

- ✓ A petition for affiliation or reinstatement shall not be received from a Brother unless he presents with his petition, satisfactory evidence that he is an affiliated Master Mason in good standing.
- ✓ A fee of \$_____ shall accompany any petition from a foreign jurisdiction, to be retained by the chapter. (A foreign jurisdiction is any jurisdiction other than Washington State)

I was initiated _____ in _____ No. _____ O.E.S.
(Date) (Chapter)

at _____
(Street Address, City, State, & Zip Code)

Date of Birth _____ Place of Birth _____ Pref Phone _____
(City & State) Home / Work / Cellular

Place of Residence _____ Alt Phone _____
(Street Address, City, State, & Zip Code) Home / Work / Cellular

Mailing Address (if different) _____ E-mail _____
(P.O. Box / Street Address, City, State, & Zip Code)

I, have / have not, previously applied or been rejected for membership in the O.E.S. To the best of my knowledge, I am eligible for membership and if accepted, I pledge myself to a careful obedience to the laws of the Order. I certify, by signing below, that I have read this petition in its entirety and that the information contained herein is complete, accurate and true.

Signature of Petitioner _____
(Signature) (Date)

Recommended by: (Must be members of petitioned Chapter)

(Signature) (Date) _____ (Signature) (Date)

Chapter Records

Presented _____, 20_____
(at Stated Communication)

Committee Report _____, 20_____
(by Appointed Committee)

Elected / Rejected _____, 20_____
(by Chapter Membership)

Notification Sent _____, 20_____
(If elected for Dual Membership, notification is sent to the Parent Chapter)

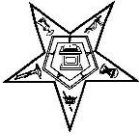
REPORT OF THE COMMITTEE

We, the committee, having met with and duly considered the petitioner, find them, Favorable Unfavorable for membership in this Chapter

(Signature) (Date)

(Signature) (Date)

(Signature) (Date)



Notification of Plural Membership

_____ 20_____
(Date)

To the Worthy Matron, Officers, and Members of _____ Chapter No. _____ O.E.S.

This is to advise you that at a stated meeting of _____ Chapter No. _____, Order of the Eastern Star of Washington, held on the _____ day of _____ 20 _____ at _____, Washington, Sister / Brother _____ a member of your chapter was elected to Plural membership in this chapter and signed the bylaws of the Chapter on the _____ day of _____, 20 _____.

(Seal)

_____ Secretary