Form 13

Petition for the Degrees of Masonry

INDIANA

To the Worshipful Master, Wardens and Brethren of

Dayton Lodge No. **103**, F. & A. M. **Dayton**, Indiana

_____ 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_____ in the year_____at_____ State of_____. He has resided within the jurisdiction of Indiana for the period of _____years and_____months. He has not been rejected by any other Masonic Lodge within the period of 90 days. 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 _____
Address_____
City,State,Zip_____
Hm Ph(____)_____Off Ph(____)_____
Age_____Email_____
Served in the Armed Forces?_____Branch_____
Father's name_____
Father's address_____
City,State,Zip_____
Is (or was) your father a Mason?_____Lodge No.____
Lodge name_____
Lodge address_____
City,State,Zip_____
Are any of your brothers a Mason? _____
If so, give their name, address, Lodge name and number and Lodge location. _____
_____
_____
Are you married?_____If so,date_____
Spouses's full name_____
Place of marriage_____
When and where did you last vote in a national election?
_____

List on back addresses of where you lived the past 10 yrs.

Signature: _____
Printed: _____
Date Signed: ____/____/_____
Mentor Name:_____

List on back places of employment for past 10 yrs.

Present/former occupation?_____
Name of firm_____
Address_____
City,State,Zip_____
Have you ever previously applied for, or been proposed as a candidate, or received any of the three degrees in any Masonic Lodge? Yes? List: _____
_____
Have you ever been denied membership in or withdrawn your petition to, or been suspended or expelled from any fraternal organization? Yes? List: _____
_____
Give names and phone numbers of three business or professional references other then those who signed this petition:_____
_____
_____
Do you have any physical impairment?_____
If so describe_____
Have you ever been convicted of a criminal offense?_____
If so give particulars including dates: _____
_____
_____
Presented Date ___/___/___ Referred to the following:
_____
_____
_____
Disposition Dates: Elected ___/___/___ E.A. ___/___/___
F.C. ___/___/___ M.M.___/___/___ Rejected___/___/___