



Petition for
32° Freemasonry
 Northern Masonic Jurisdiction, U.S.A.

Scottish Rite Cathedral
 650 N. Meridian St.
 Indianapolis, IN 46204-1214
 317-262-3100 ≈ 800-489-3579
www.aasr-indy.org



To the Officers and Members of The Scottish Rite, Valley of Indianapolis:

Date _____

I, _____, respectfully show that I am desirous of being admitted as a
Please Print Full Name
 member of your honorable body, and humbly request that I may be received among you.

QUALIFICATIONS AND REQUIREMENTS FOR MEMBERSHIP

All applicants must be: (1) A resident of Indiana for one year (2) A Master Mason in good standing in a Symbolic Lodge recognized by the Grand Lodge Free and Accepted Masons of the State of Indiana (3) Recommended by one (1) members of the Valley of Indianapolis.

When born _____ Place of Birth _____
Month, Day, Year City State

Resides at _____
Street City State ZIP Code

I have resided in the State of Indiana _____ Year(s), and in this County _____ Months / Years (Circle One)

Occupation _____ Firm Name _____

I am now a member of _____ Lodge No. _____ F. & A.M. located at _____
Please attach a copy of your current lodge dues City, State

Candidate Information

Signed: _____
First Middle Last
 Initials are NOT sufficient

MAILING ADDRESS

Preferred Name: _____

Address: _____

City: _____ State ZIP _____

Home Phone: _____ Cell. _____

E-mail address: _____

Spouse's Name: _____

Were you a DeMolay? _____ If yes, where _____

“Valley Visa”

Upon receipt of petition and payment of \$150.00, petitioner will receive a temporary Membership Card or “Valley Visa” entitling said petitioner to all the rights and privileges of membership except attending tiled meetings of the Valley.

The Rules and Regulations provide A petition for the degrees shall be signed by the applicant's own hand, and by one member of The Scottish Rite, Valley of Indianapolis, who shall certify to his personal acquaintance with the petitioner and his qualifications for membership.

Recommended by: (Please PRINT or TYPE)

_____ Rite No. _____

Resident of _____ County

Payment: \$150.00 - Fee must accompany petition

() Check () Cash () Credit

Name on Card _____

Exp _____ Sec. Code _____

Card # _____

I am “Bringing a Buddy”, to join with me!

Name: _____