



PETITION FOR THE DEGREES OF
CRYPTIC MASONRY IN OREGON

For: INITIATION AFFILIATION DUAL MEMBERSHIP

To the Officers and Members of:

Council No. Cryptic Masons

Petitioners Full Name	<input type="text"/>	Date	<input type="text"/>
Home Address	<input type="text"/>	Phone	<input type="text"/>
Email Address	<input type="text"/>	Cell Phone	<input type="text"/>

I hereby certify that I was regularly Initiated, Passed, and Raised to the Sublime degree of Master Mason in _____ Lodge No. _____ A.F.&A.M F.&A. M. (circle one) located at _____ . I hereby also certify that I have received the Mark Master, Past Master, Most Excellent Master and Royal Arch Mason degrees in _____ Chapter No. _____ located at _____ .

That I have resided in the State of Oregon for _____ months. If found worthy, I promise a cheerful compliance to all the regulations and ancient usages and customs of Cryptic Masonry.

Date of Birth	<input type="text"/>	Birth Place	<input type="text"/>
Occupation	<input type="text"/>	Business Address	<input type="text"/>
Date	<input type="text"/>	Signed	<input type="text"/>

Recommended By

INITIATION FEE OR CURRENT YEAR'S DUES MUST ACCOMPANY THIS PETITION

TO:	<input type="text"/>	Council No.	<input type="text"/>	Cryptic Masons	<input type="text"/>		
Initiation Fee (if applying for degrees)	\$	Fee Paid	<input type="text"/>	Yearly Dues (Affiliation or Dual)	\$	Dues Paid	<input type="text"/>
If for Affiliation or Dual Membership: Formerly (or presently) a member in good standing of _____ Council No. _____, Cryptic Masons, located at _____ as shown by the attached Demit or Certification of good standing.							