



Petition for the Degrees of Masonry Lessing Masonic Lodge #464 F. & A.M.

301 Chestnut Street * Evansville, Indiana 47713-1248



To the Worshipful Master, Wardens and Brethren of

Lessing Lodge No. 464, F. & A. M. Evansville, Indiana
<http://www.lessinglodge464.com>

(PRINT FULL NAME) _____ 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 _____, 19____, at _____, State of _____. He has resided within the jurisdiction of your Lodge for the period of _____ years and _____ months next preceding the date of this petition. He has not been rejected by any other Masonic Lodge within the period of one year. 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 _____

Hm Ph(____) _____ Off Ph(____) _____

Age _____ Email _____

Served in armed forces? _____ Branch? _____

Father's name _____

Father's address _____

City, State, Zip _____

Is (or was) your father a Mason? _____ Lodge Number _____

Lodge Name _____

Lodge address _____

City, State, Zip _____

Any Brother's Masons? _____

If so give their names, addresses, and the names and location of their lodges. _____

Are you married? _____ If so, date _____

Spouse's full name _____

Place of marriage _____

When and where did you last vote in a national election? _____

Address's of where you lived the past 10 years: _____

List places of employment for the past 10 years: _____

Present Occupation? _____

Name of firm _____

Address _____

City, State, Zip _____

Have you ever been denied membership in, or withdrawn your petition to, or suspended or expelled from any fraternal organization? _____

Give particulars _____

Give names and phone numbers of three business or professional references other than those who signed this petition: _____

Do you have any physical impairment? _____

If so describe _____

Have you ever been convicted of a criminal offense (minor traffic violations excluded) in a court of competent jurisdiction? _____

If so give particulars: _____

Presented Date ____/____/____ Referred to the following Committee: _____

Signature _____

Printed: _____ Date ____/____/____

Mentor Name: _____

Disposition: Elected Date ____/____/____ E.A. Date ____/____/____

F.C. Date ____/____/____ M.M. Date ____/____/____

Rejected Date ____/____/____

Use back of form to provide additional information when necessary.