Ancient and Accepted SCOTTISH RITE OF FREEMASONRY

Southern Jurisdiction of the United States of America - Valley of Greenville / Orient of South Carolina Mailing address: PO Box 5776 Greenville, SC 29606

To the officers and members of: the GREENVILLE LODGE OF PER the GREENVILLE COUNCIL OF KADOSH 30 TH DEGREE, and the GR			
Name: First Middle			
Nickname or preferred name Mailir	ng Name		
Residence			
(Street) (City)	(County)	(State)) (Zip Code)
How long a resident of South Carolina (Must be at lea	ast six months unless in Armed For	rces)	
Telephone:			
(Home) (Work)	(Mobile) *	(E	<mark>-Mail)</mark> *
Date of Birth Place of Birth			
(Month/Day/Year)	(City)	(County)	(State)
Marital Status Spouse Name		supation	
Name of Business, Firm or Employer			
I am a Master Mason in good standing in			
Located at u	inder the jurisdiction of the	Grand lodge of	
 Have you ever held or expressed opinions contrary to the foregoing or which has? (if yes, explain fully on a second second	reverse side of this form.) tion? (If yes, o the degree inclusiv	explain fully on reverse e, promising always a	
Signed:		··· · · ·	
	<mark>(Full Name – Do not use in</mark>	itials)	
We the undersigned, certify that we know the petitioning brother, and the information as the order requires in its members and we recommend his		nd tolerant man, of suc	h intelligence and
Sign:			
Print:	FEES FOR DEGREES	<u>A</u>	NNUAL DUES
	4 TH TO 14 TH Lodge - \$100 15 th to 18 th Chapter - \$50		\$40 \$20
Sign:	19 th to 30 th Council - \$50 31 st to 32 nd Consistory - \$50		\$20 \$20
Print:	Total \$250	Foundation	
(Recommended by two Members of the Scottish Rite or			otal \$110
Master and Secretary of Blue lodge under seal)	¹ <u>\$100 dollar deposit to accompany petition</u> to be applied to total fees. Checks payable to Greenville Lodge of Perfection		
	Tees. Checks payable t	o dieenvine Louge (
* Please indicate Ring size for presentation of your 14 th (Degree ring. * Also, pl	ease indicate Ha	it Size
(Rings are available in half sizes, i.e. 10, 10-, 11, 11)	(Hats available in Fract		
Please Check Appropriate box: PETITION FOR:Degrees	AFFILIATION	_ REINSTATEMENT	
Office Use Only			
Deposit with Petition Amount: Check Number:	Cash:		
Date received: Date read:			
Date elected: Date notified:			