



El Bekal Member # \_\_\_\_\_

Date: \_\_\_\_\_

PETITION FOR INITIATION AND MEMBERSHIP INTO EL BEKAL SHRINE  
1320 S. Sanderson Ave. Anaheim, CA 92806 (714) 563-9111

To the Illustrious Potentate, Officers and Nobles of El Bekal Shrine, Shriners International, Situated in the Oasis of Anaheim, Desert of California. I the undersigned hereby declare that I am a Master Mason in good standing in

\_\_\_\_\_ Lodge No \_\_\_\_\_ located at \_\_\_\_\_

Furthermore, I do not now, and never will hold membership in or allegiance to anybody claiming to be Masonic that has been declared clandestine; that I have resided within the jurisdiction of your Shrine, or unoccupied territory, not less than 6 months, as required by the bylaws of The Imperial Council and that I am not under suspension or expulsion in the prerequisite body to this Order, and respectfully pray that I may be made a Noble of the Mystic Shrine, and become a member of your Shrine. If I be found worthy, and my request granted, I promise to conform to the Articles of Incorporation and bylaws of the Imperial Council and the bylaws and Ceremonies of your Shrine.

Birthplace: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Res. Phone ( ) \_\_\_\_\_

Occupation: \_\_\_\_\_ Bus. Phone ( ) \_\_\_\_\_  
If retired, list former occupation

E-Mail: \_\_\_\_\_ Wife's Name: \_\_\_\_\_

Have you previously applied for admission to another Shrine Temple? \_\_\_\_\_ Is so which Shrine \_\_\_\_\_

When: \_\_\_\_\_

Residence: \_\_\_\_\_  
Number & Street City State Zip

Business: \_\_\_\_\_  
Number & Street City State Zip

Mail address: \_\_\_\_\_  
Number & Street City State Zip

Hat size: \_\_\_\_\_

Print full name: \_\_\_\_\_ Signature: \_\_\_\_\_

If elected, the signing of this petition constitutes the signing of the bylaws of El Bekal Shrine, Shriners International Recommended and vouched for on the Honor of: (both must sign and be members of El Bekal Shrine)

Noble: \_\_\_\_\_  
Print Name Address Zip Phone Blue Lodge Card #

Noble: \_\_\_\_\_  
Print Name Address Zip Phone Blue Lodge Card #

Credit, Unit-Club: \_\_\_\_\_

THIS PETITION CANNOT BE ACTED UPON UNLESS ACCOMPANIED BY THE FULL FEE OF \$150.00

Recorder's use:  
Date received: \_\_\_\_\_ Type of Payment: Personal Check \_\_\_\_\_ Cash: \_\_\_\_\_

MC [ ] Visa [ ] Card # \_\_\_\_\_ Exp \_\_\_\_\_