

MOST WORSHIPFUL STRINGER GRAND LODGE F. & A. M. JURISDICTION OF MISSISSIPPI PRINCE HALL AFFILIATION



APPLICATION FOR REINSTATEMENT

Date	
	ress City
Stat	te Zip Code Telephone: (Home) (Work)
Date	e of Birth: Month Day Year Age
	ce of Birth: City County State Country
Occi	mation:
Plea	ase answer the following questions, completely, using check marks where possible.
1.	Are you married?, divorced?, single, or widowed?
	If married, name of wife:
	(Wife's address, if different from yours):
2.	Do you believe in God? Yes , No . Do you believe in the immortality of
	the soul? Yes_, No Name and location of church if you are a member:
3.	Do you have any habits that could be regarded as immoral or unmasonic? Yes No
4.	Have you been convicted of murder? , theft? , or treason?
5.	Have you any physical defects that would cause you to be a burden to this
057775	lodge? Yes , No
6.	Have you any physical defects, have now or have had any illness, that would
	prevent you from being totally active as a mason? Yes , No .
7.	a. Are you reinstating into the same lodge in which you held your last member-
	ship? Yes ,No .
	b. If answer to 7a is no, have you applied for a demit? Yes , No .
8.	If the answer to 7a above is no, please complete this item as accurately as
-	possible:
	a. State reasons for becoming inactive:
	b. Name and number of last lodge of membership:
	c. Address of last lodge of membership:
	et mateur et met rede et membersing.
	d. Have you a past traveling card from this lodge? Yes ,No
9.	Date (year) of your last affiliation with last lodge of membership:
10.	Do you agree to chew all laws and regulations of this lader and the Great Tales
	Do you agree to obey all laws and regulations of this lodge and the Grand Lodge, and to honor all summons therefrom? Yes ,No
11.	Name of beneficiary:
	Address of beneficiary:
	Relation of beneficiary to applicant:
	Relation of beneficiary to applicant:
	CICALAUTIDE OF ADDITIONAL
	SIGNATURE OF APPLICANT:
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	DO NOT WRITE BELOW THIS LINE
	FOR LODGE USE ONLY
actio	on taken by lodge: Date received: Accepted Rejected
inves	stigating committee (if necessary): Bro. ,Chairman; Brothers:
rees	gaid: G.L. Rein. G.L. Dues Local past fees Local dues Total Total Total
	G.L. Rein, G.L. Dues Local past fees Local dues Total
Appro	oval from Grand Lodge: Yes, No Demit status:
Benef	fit status in G.L.:
Benef	it status in local lodge:
f ad	mitted date of admission to lodge:
au	mitted, date of admission to lodge: