

Name: _____

Credit Card Information

- Visa MC Discover

CREDIT CARD NUMBER:

EXPIRATION DATE: _____

V-CODE: _____

Total: \$ _____

SIGNATURE:

Jaffa County Shrine Clubs

(check if you reside in area)

- Altoona (Blair County)
- Bedford County
- Cambria County
- Cameron County
- Centre County
- Clearfield County
- Clinton County
- Cove Area
- Dubois Area
- Fulton County
- Huntingdon County
- Indiana County
- Jefferson County
- Johnstown Area
- Mifflin County
- Potter County
- Somerset County
- Westmoreland County
- Other: _____

Units & Clubs

Check Units and Clubs you would like information about

Units

- ATC
- Band
- Calliope Clowns
- Chanters
- Color Guard
- Cycle Corps
- Drum & Bugle Corps
- Greeters
- Highlanders
- Legion of Honor
- Lil' Vettes
- Motor Corps
- Mounted Patrol
- Oriental Band
- Patrol & Director Staff
- Provost Guard
- String Band
- Ushers

Clubs

- Antique & Classic Vehicle
- Jaffa Campers
- Jaffa Athletic Club
- Jaffa Roadrunners
- Mountain City Shiners

Credit for this Petition should go to

(Unit / Club)



PETITIONS

**For
RESTORATION
AFFILIATION**

ASSOCIATE MEMBERSHIP

JAFFA SHRINERS

2200 Broad Ave
Altoona, PA 16601

Office: (814) 944-4043

www.jaffashriners.org
www.jaffashrinecenter.com

Petition for Restoration

Cost \$150

Jaffa Shriners

To the Potentate, Officers and Nobles of Jaffa Shriners, situated in the Oasis of Altoona, Desert of Pennsylvania: I, the undersigned, a former member of your Shrine and

now under sentence of _____

because of _____ respectfully request that I may be restored to membership. I have liquidated all of my indebtedness to Jaffa Shriners and if my request be granted, I promise to conform to the Articles of Incorporation and bylaws of the Imperial Council together with those of Jaffa Shriners. I furthermore declare that: I am a Master Mason in good standing

at _____ Lodge No. _____

City _____ State _____

Birthplace _____ DOB _____

Lady's Name _____

Residence _____

City _____ State _____ Zip _____

Home Phone (_____) _____

Cell Phone (_____) _____

Email _____

Profession _____

Business Phone (_____) _____

Date _____

Signature _____

Print Full Name _____

Recommended by:

Noble _____ No _____

Noble _____ No _____

Petition for Affiliation

Cost \$90

Jaffa Shriners

To the Potentate, Officers and Nobles of Jaffa Shriners, situated in the Oasis of Altoona, Desert of Pennsylvania: I, the undersigned, a Noble of Shriners International, initiated

in _____ Shriners, located at _____

on (date) _____ and last a member of

_____ Shriners, located at _____

which has granted the attached Certificate of Demit, respectfully pray that I may be admitted as a member of your Shrine. I furthermore state that I have resided within the jurisdiction of Jaffa Shriners not less than six months, as required by the bylaws of the Imperial Council. I hereby declare that I am a Master Mason in good standing

at _____ Lodge No. _____

City _____ State _____

Birthplace _____ DOB _____

Lady's Name _____

Residence _____

City _____ State _____ Zip _____

Home Phone (_____) _____

Cell Phone (_____) _____

Email _____

Profession _____

Business Phone (_____) _____

Date _____

Signature _____

Print Full Name _____

Recommended by:

Noble _____ No _____

Noble _____ No _____

Petition for Associate Membership

Cost \$55

Jaffa Shriners

To the Potentate, Officers and Nobles of Jaffa Shriners, situated in the Oasis of Altoona, Desert of Pennsylvania: I, the undersigned, a Noble of Shriners International, initiated

in _____ Shriners, located at _____

on (date) _____ and last a member of

_____ Shriners, located at _____

being eligible under 323.10(a), respectfully pray that I may be admitted as an associate member of Jaffa Shriners in accordance with 323.7.

I hereby declare that I am a Master Mason in good standing

at _____ Lodge No. _____

City _____ State _____

Birthplace _____ DOB _____

Lady's Name _____

Residence _____

City _____ State _____ Zip _____

Home Phone (_____) _____

Cell Phone (_____) _____

Email _____

Profession _____

Business Phone (_____) _____

Date _____

Signature _____

Print Full Name _____

Recommended by:

Noble _____ No _____

Noble _____ No _____