PETITION FOR RESTORATION

		SHRINERS		
TO THE POTENTATE,	OFFICERS AND NOBLES OF_	:		
		STATE OF		
l, the undersigned, as a member of				
		ored to membership in		
		to the articles of incorporation and by		
		declare that I am a Master Mason in		
-	•		_	
		laws of Shriners International.		
	,			
Birthplace		Date of Birth		
Occupation			, 1 ¹⁰ 100 ¹ 1 ¹ 100 1	
Residence				
	(Street Addr	ess, City, State, Zip, County)		
Business Address_	<u>,</u>			
	(Street Addr	ess, City, State, Zip, County)		
Mail Address			. =	
	(Street Addr	ess, City, State, Zip, County)	ı	
Home Phone	<u>-</u>	Cell Phone		
Business Phone		e-mail		
Lady's Name		Lady's e-mail		
Name				
	(Printed name in FULL -	initials are not sufficient)		
Signature				
			(Date)	