



Cape Coral Shrine Club

360 S. Santa Barbara Blvd. - Cape Coral FL 33991-2033
(239) 772-1511 - CCShrineClub@embarqmail.com



DATE of PETITION: _____ / _____ / 20_____

NAME (in full): _____

LOCAL ADDRESS:

STREET: _____ CITY: _____

STATE: _____ ZIP: _____ PHONE: (____)_____ EMAIL: _____

BIRTHDAY (MM/YR): _____ / _____ WEDDING ANNIVERSARY (MM/YR): _____ / _____

WIFE'S NAME: _____

VACATION ADDRESS: (Please circle months away) JAN FEB MAR APR MAY JUN JUL AUG SEP OCT NOV DEC

STREET: _____ CITY: _____

STATE: _____ ZIP: _____ PHONE: (____)_____ EMAIL: _____

PRESENT BUSINESS OR OCCUPATION: _____

PREVIOUS OCCUPATION: _____

Based on the assumption that all Shrine Club members have an obligation to share in the activities of the Club, social and otherwise, check below those committees on which you are willing to serve.

___ FINANCE: (Budget - Auditing - Reports)

___ WAYS & MEANS: (Club Socials - Building Activity Planning - Fund Raisers)

___ HOUSE: (Building & Grounds Maintenance - Bar Services & Function Management - Kitchen Activities Dining Room Set-up) Please circle all which may apply.

___ PROPERTY SERVICES: (Purchasing, etc.)

___ MEMBERSHIP GROWTH: (Securing New Members - Induction and indoctrination of same.)

___ PUBLIC RELATIONS: (Bulletin - Press Releases, etc.)

___ PROGRAM: (Meetings and/or Special Entertainment Affairs)

___ VOLUNTEER SERVICES COORDINATOR: (Scheduling Club Activities / Volunteers)

INITIATION FEE: **\$20.00**

ANNUAL DUES: **\$30.00** (pro-rated @ 4 month intervals)

INITIATION FEE AND CURRENT DUES MUST ACCOMPANY THIS PETITION. AFTER DECEMBER FIRST, NO DUES CHARGE IS MADE FOR THE REMAINDER OF THE YEAR, BUT FULL \$20.00 INITIATION FEE FOR THE FOLLOWING YEAR MUST ACCOMPANY THE PETITION.

TO THE NOBLES OF THE CAPE CORAL SHRINE CLUB, CAPE CORAL, FLORIDA, UNDER THE JURISDICTION OF ARABA SHRINERS, IN THE OASIS OF FORT MYERS, FLORIDA, A.A.O.N.M.S.

I, HEREBY DECLARE THAT I AM A MASTER MASON IN GOOD STANDING IN:

_____ LODGE # _____ AT _____

AND A SHRINER IN GOOD STANDING IN _____

TEMPLE AT THE OASIS OF _____

(Please print all of the above information)

I UNDERSTAND THAT MY CONTINUED MEMBERSHIP IS PREDICATED ON MY MAINTAINING GOOD STANDING IN ALL OF THE PREREQUISITE BODIES AND AGREE THAT, IF ELECTED TO MEMBERSHIP IN THE CAPE CORAL SHRINE CLUB, I WILL NOTIFY THE CLUB SECRETARY OF ANY CHANGE IN MY STATUS.

YOUR SIGNATURE: _____

RECOMMENDED AND VOUCHERED FOR ON THE HONOR OF:

NOBLE: _____

NOBLE: _____

Please return this petition with your check payable to Cape Coral Shrine Club, 360 S. Santa Barbara Blvd., Cape Coral FL 33991-2033

(Both sides of this petition must be completed)