

King Solomon Chapter



An Honorary Chapter of

DEMOLAY
FLORIDA

Full Name: _____

Home Address: _____

City, State, Zip: _____

Mailing Address (if different from above): _____

City, State, Zip: _____

Phone Number: _____ Birthdate: _____

E-mail Address: _____

By providing my e-mail address, I consent to receive e-mail communications from Florida DeMolay, understanding that they will not share my contact information? Yes No

Masonic Lodge/No.: _____ Location: _____

Lodge Membership ID Number: _____

Are you a member of any Masonic appendant bodies? Yes No

Shriners Scottish Rite York Rite Grotto OES Other: _____

Are you a Senior DeMolay? Yes No

If so, which Chapter (Name, Location)? _____

Have you received DeMolay Honors? Chevalier Cross of Honor Legion of Honor

Are you interested in serving as a DeMolay Advisor? Yes No

Any additional pertinent information: _____

Respectfully submitted:

Signature _____

Date _____

Thank You!

*for your continued dedication to Masonic Youth,
and FL DeMolay in particular!*

For internal use only - To be completed by a DeMolay Chapter leader:

Degree date: _____

Initiatory Degree

DeMolay Degree

Registration fee of \$100 to be remitted with a copy of the petition, payable to Florida DeMolay.