



# ALZAFAR SHRINE CENTER

A.A.O.N.M.S.  
901 N. LOOP 1604 WEST, SAN ANTONIO, TEXAS 78232-1040

## PETITION FOR INITIATION AND MEMBERSHIP

TO THE POTENTATE, OFFICERS AND NOBLES OF ALZAFAR SHRINE TEMPLE, SITUATED IN THE OASIS OF SAN ANTONIO, DESERT OF TEXAS:

I, the undersigned, do hereby declare that I am a Master Mason in good standing in \_\_\_\_\_  
\_\_\_\_\_ Lodge # \_\_\_\_\_ located at \_\_\_\_\_  
\_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

which is a Lodge recognized or in amity with the Conference of Grand Masters of North America. Furthermore, I have resided at my current address for not less than 6 months, as required by the Bylaws of The Imperial Council. I respectfully pray that I may be made a Noble of the Mystic Shrine and become a member of your temple.

If I be found worthy, and my request be granted, I promise to conform to the Articles of Incorporation and Bylaws of The Imperial Council and the Bylaws and Ceremonies of your Temple.

Birthplace \_\_\_\_\_ Date of Birth \_\_\_\_\_

Were you ever a DeMolay? \_\_\_\_\_ If so, what was the Chapter name and location? \_\_\_\_\_

Profession or occupation \_\_\_\_\_

Have you previously applied for admission to any temple of the Order? \_\_\_\_\_

If so, what temple? \_\_\_\_\_ When? \_\_\_\_\_

Residence Address \_\_\_\_\_  
Street \_\_\_\_\_ City \_\_\_\_\_

County \_\_\_\_\_ ZIP \_\_\_\_\_

Business Address \_\_\_\_\_  
Street \_\_\_\_\_ City \_\_\_\_\_

County \_\_\_\_\_ ZIP \_\_\_\_\_

Business Phone \_\_\_\_\_

Mail Address \_\_\_\_\_

Home Phone \_\_\_\_\_

E-mail Address \_\_\_\_\_

Wife's Name \_\_\_\_\_

Date \_\_\_\_\_ 20\_\_\_\_ Signature \_\_\_\_\_

Print Full Name \_\_\_\_\_  
Name in Full, initials not sufficient

Recommended and Vouched for on the Honor of Noble \_\_\_\_\_

Noble \_\_\_\_\_

Submitting Petition member of  
Unit \_\_\_\_\_

Club \_\_\_\_\_

Hat Size (for Fez) \_\_\_\_\_

# NEW MEMBER SURVEY

Welcome to Alzafar Shrine Center. We wish to make you a complete member of the fraternity. Please complete the following survey. It will be used to assist us in finding activities, units, and clubs that you will enjoy being associated with. It will not be released to any activity not a part of Alzafar.

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ H/P (\_\_\_\_) \_\_\_\_\_

Spouse's Name: \_\_\_\_\_ Children living at home: Boys \_\_\_\_ Girls \_\_\_\_

Education: High school \_\_\_\_ Some College \_\_\_\_ College \_\_\_\_ Grad School \_\_\_\_ Trade School \_\_\_\_

Military Service: None \_\_\_\_ Army \_\_\_\_ Navy \_\_\_\_ Marines \_\_\_\_ Air Force \_\_\_\_ Coast Guard \_\_\_\_

Active \_\_\_\_ Reserve \_\_\_\_ NG \_\_\_\_ WWII \_\_\_\_ Korea \_\_\_\_ Vietnam \_\_\_\_ Desert Shield \_\_\_\_ Other \_\_\_\_

Are you currently employed? Yes No If yes, where? \_\_\_\_\_

Field of Work/Profession: \_\_\_\_\_

Blue Lodge: \_\_\_\_\_ # \_\_\_\_\_

Office held: Master \_\_\_\_ Sr. Warden \_\_\_\_ Jr. Warden \_\_\_\_ None \_\_\_\_

Scottish Rite: Yes No York Rite: Yes No Grotto: Yes No Other \_\_\_\_\_

Offices held in any of the above: \_\_\_\_\_

Please circle any of the activities in which you may be interested. You will be provided a list of units and clubs that describe their function and activities. The ACHBAR lists meeting time and location of all Shrine units and clubs. Please feel free to visit any and all of them. If you would like someone to contact you, please let the Recorder know. Someone will call you and make you welcome.

- |                   |                    |                   |           |
|-------------------|--------------------|-------------------|-----------|
| INDOOR ACTIVITIES | OUTDOOR ACTIVITIES | EVENT PREPARATION | HISTORY   |
| MARKSMANSHIP      | HUNTING            | FISHING           | TRAVEL    |
| MARCHING UNITS    | PUBLIC SERVICE     | MANAGEMENT        | RITUAL    |
| MECHANICAL        | MAINTENANCE        | CLEAN UP          | COOKING   |
| COMMUNICATIONS    | PUBLICITY          | ACTING            | GOLF      |
| CLOWNS            | MUSIC              | DRIVING           | SECURITY  |
| MASONIC RELATIONS | HOSPITAL CORPS     | FORMAL EVENTS     | RV EVENTS |
| VOLUNTEER         | OTHER: _____       |                   |           |