BLUE STAR LODGE MEMBERSHIP APPLICATION

Date of Application:/_ (MM) (D	DD) (YYYY)					
Name:						
Home #:		Cell #:				
Email Address						
Address:						
Date of Birth:///	/ Spouse YYY)	's Name:				
Children:						
Name	Birthday (MM/DD/YYYY)			Gender (M/F)		
				<u> </u>		
Employer:	Occ	cupation:				
Are you a member of any othe Name of Organization and pos	-					
Death Benefit Beneficiary(s):		%	D.O.B_	/	/	
_		%	D.O.B_	/	/	
To reserve a double plot pleas	e check here(\$200 deposit	t to be in	cluded)		
Signature of Applicant:						
I hereby apply for membersh constitution and by-laws of th	ip in the Blue Star Lo	odge and do a	agree to	abide by	the	
Please note: Upon acc applicant shall be cons he shall be eligible for Blue Star Lodge.	eptance of this appli sidered a probationa a full permanent me	cation by the ry member fo mbership, ac	Lodge E or 6 mon ccording	xecutive, ths: after to the by	, the r which time r-laws of the	
For office use only						
Initiation/ Catchup Fee:	Dues:		Reserve P	lot:		
Total Amount Due:	Amount Paid					
Probationary Period Starts:/(MM) (D	/					
	Treasurer's Signatu	ıre:				