

Ancient & Accepted Scottish Rite of Freemasonry

SOUTHERN JURISDICTION OF THE UNITED STATES OF AMERICA
VALLEY OF CUMBERLAND—ORIENT OF MARYLAND

Mail to: Cumberland Scottish Rite Phone 301-729-6778
73 LaVale Blvd Fax - 301-729-4327

73 LaVale Blvd LaVale, MD 21502-7418

Email - mitzjer@atlanticbb.net

To the Officers and Members of:

CUMBERLAND LODGE OF PERFECTION CUMBERLAND CHAPTER OF ROSE CROIX

CUMBERLAND COUNCIL OF KADOSH CUMBERLAND CONSISTORY

I have never applied for any of the Scottish Rite Degrees, and I now respectfully petition to receive the degrees, from the fourth to the thirty-second inclusive, promising always to bear true faith and allegiance to the Supreme Council of the Thirty-Third Degree of the Southern Jurisdiction of the United States of America.

(Note: If applicant has previously applied for any of the degrees, explain fully as to date, place and to what bodies such application was made.)

APPLICANT'S FULL NAME (Please Print)						
am a Master Mason in good standing i	n	Lodge No				
Location	Under t	the jurisdiction of the C	Grand Lodge of			
Date Raised	If raised in a Maryland Lodge, have you passed exam in 3rd degree Catechism?					
Residence						
1ail Address						
And I have resided at my current residence p	receding date of this p	etition for	· · · · · · · · · · · · · · · · · · ·		_ months/years.	
elephone Number	Cell Number		E-mail Address_			
Pate of Birth	Place of Bi	irth				
1y Occupation, position, or trade is that of_						
imployed by (or Retired from)						
Recommended by t	wo members in go	od standing in the	Maryland Scottis	h Rite Bodies,		
Printed Name			Signature		Date	
2)						
Printed Name			Signature		Date	
underlying loyalty to the principles of the United States of America. I 2. Have you ever been held or expressed	Do you approve wholel	heartedly of these princ	ciples? (Yes or No)			
(Yes or No)	_: If your answer is in	n the affirmative, give pa	articulars:			
I certify that the above information	is true and correc	t to the best of my	knowledge.			
Signed			DATI	E		
Ap	plicant					
INITIATIOI	N FEE: \$250.00	(Regardless	of age)			
	Offic	ce Use Only				
Petition received		CAP S	SIZE	RING SIZE		
Amount received \$				·		
Check No Cash \$		LADIE	'S NAME			
sallot Date of Petition				_		
Notification Date						