



# Florida DeMolay

## MEMBERSHIP APPLICATION (POCKET PETITION)

An Organization for Young Men

1. Name: \_\_\_\_\_

2. Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

3. Address: \_\_\_\_\_

4. City: \_\_\_\_\_

5. State **Florida** Zip: \_\_\_\_\_

6. Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

7. Birthdate: \_\_\_\_\_

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

8. School Attending: \_\_\_\_\_

\_\_\_\_\_

9. Grade: \_\_\_\_\_

10. Favorite School Subject(s):

\_\_\_\_\_

\_\_\_\_\_

11. Hobbies/Interests:

\_\_\_\_\_

\_\_\_\_\_

12. Clubs, Organizations:

\_\_\_\_\_

\_\_\_\_\_

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13. Church/Synagogue:

\_\_\_\_\_



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14. References: List three friends  
(your age) you have known for one year.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

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Address: \_\_\_\_\_

Phone: \_\_\_\_\_

My Parents/Guardians approve of my  
joining DeMolay.

15. Father's Name:

16. Mother's Name:

17. Is your father a Senior DeMolay?  
**(Yes / No)** If so, where?

18. Is your father a Mason?  
**(Yes / No)** If so, where?

19. Parent/Guardian Signature:

20. Applicant's Signature:

21a.1<sup>st</sup> DeMolay Sponsor's Name & Signature:

21b.2<sup>nd</sup> DeMolay Sponsor's Name & Signature:

22. Masonic Sponsor's Name and Signature:

Your Life Membership Fee of \$  
must accompany this application.

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