

**PETITION FOR INITIATION AND MEMBERSHIP  
ARABIA TEMPLE, A.A.O.N.M.S.**

**P. O. Box 420549  
Houston, TX 77242**

**713/664-3437**

**10510 Harwin Drive  
Houston, TX 77036**

**TO THE POTENTATE, OFFICERS AND NOBLES OF ARABIA TEMPLE, SITUATED IN THE OASIS OF HOUSTON,**

**DESERT OF TEXAS: I, the undersigned, hereby declare that I am a Master Mason in good standing in \_\_\_\_\_**

**Lodge # \_\_\_\_\_ located at \_\_\_\_\_, \_\_\_\_\_ which is a Lodge recognized**

**by 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 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 in the Military? \_\_\_\_\_ If so, what branch and dates of service. \_\_\_\_\_**

**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 \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Business Address \_\_\_\_\_**

Street \_\_\_\_\_ City \_\_\_\_\_

County \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Mail Address: \_\_\_\_\_**

**Business Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_**

**Wife's Name: \_\_\_\_\_ Fez Size: \_\_\_\_\_**

**Date \_\_\_\_\_, 20 \_\_\_\_\_ Signature \_\_\_\_\_**

**Print Full Name Here \_\_\_\_\_**

Name in full, initials not sufficient

**IMPORTANT: I plan to be initiated at the \_\_\_\_\_ class.**

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

**Noble \_\_\_\_\_ Unit \_\_\_\_\_**

I will support and participate in Arabia Temple's Hospital Benefit and Shrine Circus to the best of my ability.

\_\_\_\_\_  
Signature

**Arabia's Jurisdiction:** Exclusive jurisdiction in the counties of Houston, Madison, Trinity, Polk, San Jacinto, Colorado, Walker, Grimes, Montgomery, Liberty, Harris, Walker, Austin and Fort Bend.  
Concurrent jurisdiction with El Mina in the counties of Wharton, Lavaca, Victoria, Jackson, Matagorda, Goliad, Refugio, Aransas and Calhoun.  
Concurrent jurisdiction with Ben Hur in the counties of Brazos, Washington and Fayette.  
Concurrent jurisdiction with Al Amin in the counties of Victoria, Goliad, Refugio, Aransas and Calhoun.  
Concurrent jurisdiction with Sharon in Angelina County.

**ARABIA TEMPLE, A.A.O.N.M.S. – INITIATION FEE LISTED BELOW**

**MAKE CHECK PAYABLE TO: ARABIA TEMPLE**

**Fees: \$235 (includes \$195 January 1st to March 31<sup>st</sup>, plus \$40 case and insert)**  
**\$215 (includes \$175 April 1st to June 30<sup>th</sup>, plus \$40 case and insert)**  
**\$195 (includes \$155 August 1st to September 30<sup>th</sup>, plus \$40 case and insert)**  
**\$175 (includes \$135 October 1st to December , plus \$40 case and insert)**

Payment of the Initiation Fee may be made in the following manner. Please check the proper schedule indicating the manner in which you are paying your fee:

- Cash or Check is attached to this petition.
- I am not including any money with this petition, but agree to pay the full fee at time of registration.
- I will charge the Initiation Fee to Visa or MasterCard.
- I will authorize a one time payment of dues and initiation fee of the above amount, plus automatic monthly charges for dues.

**For Office Use Only:**

Receipt No. \_\_\_\_\_ Amount \_\_\_\_\_ Date Paid \_\_\_\_\_ Cash/Check/Card \_\_\_\_\_