



**The Most Worshipful United Grand Lodge
Ancient Free & Accepted York Rite Masons
Jurisdiction of Georgia**



Petition for Healing

DATE: _____

It is my desire to join this York Rite Family.

Previous Affiliation: _____

I would like to join Lodge _____ No _____

If accepted, I promise to pledge my honor as a Brother to support and adhere to the Rules and Regulations as set forth by United Grand Lodge. I pledge my Time, Talent and Treasures wherever and whenever needed.

NAME _____ AGE _____
First Middle Last

PRESENT ADDRESS: _____ GA _____
Street City State Zip

EMAIL: _____ CONTACT #: _____

MARITAL STATUS: SINGLE MARRIED

SPOUSE NAME _____ CONTACT NO. _____

By signing this statement affirms that I will be a Responsible, Loyal and Dedicated member to this York Rite Family.

This _____ Day of (month) _____, (year) _____

Applicant's Signature: _____

Application Fee \$ _____ Status of Application: Accept Declined Date of Investigation _____

Signature _____
Secretary

Signature _____
Worshipful Master

Date of Healing Oath and Obligation _____

Signature _____
Grand Master