

Chapter Name and Number: \_\_\_\_\_

Date: \_\_\_\_\_

IHF \_\_\_\_\_

## New Membership Report Form

Complete the appropriate sections and send to the Grand Chapter Office  
with the \$5 International Headquarters fee.

Complete for **ALL** new memberships: **Section #1**

### Section #1

**Type of Membership:**

Initiate: \_\_\_\_ Affiliation: \_\_\_\_ Plural: \_\_\_\_

**Name of Member:** \_\_\_\_\_

**Date Initiated:** \_\_\_\_\_

**Initiation Chapter Name, #, and State** \_\_\_\_\_

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

**Telephone #:** \_\_\_\_\_

**DOB:** \_\_\_\_\_

### Section #2: Complete only if New Initiate

Relationship of member to the Master Mason: \_\_\_\_\_

Name of Master Mason: \_\_\_\_\_

Lodge of Master Mason: \_\_\_\_\_ Lodge # \_\_\_\_\_

Lodge location (town and state): \_\_\_\_\_

### Section #3: Complete only if New Affiliate or Plural Member

Affiliation-Plural Membership Date: \_\_\_\_\_ (Date of Ballot)

Demit from: \_\_\_\_\_ (N/A) if not demitted)

Demit Date: \_\_\_\_\_ (N/A) if not demitted)

Affiliate is a member of these additional chapters: (Name, Number, Location)

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