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THE ORDER OF THE SONS OF PERICLES

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MEMBERSHIP APPLICATION

Chapter Name & #: **City:** **District #:**

First Name: **Middle Initial:** **Last Name:**

Street Address: **City:**

State: **Zip Code:** **Date of Birth:**

Phone: **Phone Type:** Home Cell **Email:**

Is your father an AHEPAN? Yes No **If Yes, what chapter # and city?**

Are you a citizen of the United States? Yes No **If No, then what country?**

Religious Affiliation (by baptism):

I believe myself worthy of the rights and privileges enjoyed by the members of this Order. I know of no reason why I should not become a member, and I promise, if accepted, to perform every duty required of me by the laws and traditions of the Sons of Pericles, and will not take undue advantage of, nor abuse, my privileges as member thereof.

Applicant Signature: _____ **Date of Application:**

ENDORSEMENT

Mindful of our sacred duties and obligations to the Sons of Pericles, and as members thereof in good standing, we hereby endorse the application of _____ and recommend that he be admitted into the mysteries of the Order, vouch for his good character, sincerity of purpose and worthiness of the privilege to become a member.

First Endorser: _____

Second Endorser: _____

REPORT OF THE INVESTIGATING COMMITTEE

We have examined the foregoing application, investigated the applicant, and recommend that be be:

ACCEPTED REJECTED

CERTIFICATION TO THE SUPREME LODGE

(TO BE COMPLETED BY CHAPTER SECRETARY)

I certify that the applicant,

was duly initiated by Chapter # _____ on _____

Signature of Secretary: _____