

Application for Membership

Rev. Jan. 2017

To the Officers and Members of		Assembly. No		
International Order of the Rainbow for Girls, located at				
The Applicant respectfully states that she freely off for Girls; that she has a favorable impression of the Order of Assembly, its Constitution and Statutes, and a cheerful comp application. She is a believer in the one true and living God	nd if elected to membershi liance to the By-Laws, Rule	p, she promises strict obedies and Regulations of the Ass	ence to the Supreme sembly to whom she makes the	
Born at City State	_ on the day	of	Year	
and amyears old;				
Resides at	Address			
City	State Zip		Phone	
My parents or legal guardian have no objection t		nal Order of the Rainbow fo	Cell Phone or Girls.	
	Grade			
Father's Name	Address	Zip	Phone	
Mother's Name	Address	Zip	Phone	
Legal Guardian's Name	Address		Phone	
My father belongs to the Masonic Lodge at	City		State State	
My mother belongs to the Eastern Star at			State	
My mother belongs to Amaranth at	,		State	
My mother belongs to the White Shrine at	<u> </u>			
My mother is a majority Rainbow Girl from	City Assembly, City		State State	
Where the father and mother are not identified w the applicant will use the following:	, ,			
I am the girl friend of me as a proper girl to receive the degrees. Have you ever applied to any other Assembly of ⁻	The International Order of		as invited and recommended No	
If so, whereCity		State		
	Signed			
Printed Name of Applicant I refer this application to	oigned	Signature of Applica	int	
1 Member of The International Order of Rainbow for Girls	-	of Mason, Eastern Star, Amaranth, W	, ,	
2	Member of	er of(Lodge, Chapter, Court, Shrine, Assembly)		
		City	State	
\$	_ MUST ACCOMPANY TH	IIS APPLICATION		

Membership Date	When Rejected	When Elected	When Due	Presented	Received
_, 20	_, 20	_, 20	_, 20	_, 20	_, 20

COMMITTEE

Report Due

REPORT

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Application for Membership



The International Order of the Rainbow for Girls

THIS APPLICATION IS PRESENTED WITH MY APPROVAL

Parent or Guardian

Name ______

Address ______

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