

# The Fifth Masonic District Association of Manhattan

71 West 23rd Street, New York, NY 10010

## Membership Application Form

Masonic Title:  R.:W.:  V.:W.:  W.:  Bro.

Name: \_\_\_\_\_ Birthday: \_\_\_\_\_

Spouse: \_\_\_\_\_

Lodge Name: \_\_\_\_\_ No : \_\_\_\_\_

Lodge Officer Title: \_\_\_\_\_ Date Raised: \_\_\_\_\_

Address: \_\_\_\_\_ Apt # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Tel: (\_\_\_\_) \_\_\_\_\_ Business Tel: (\_\_\_\_) \_\_\_\_\_

Cell No.: (\_\_\_\_) \_\_\_\_\_ Fax No.: (\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

Occupation: \_\_\_\_\_

Business Location: \_\_\_\_\_

Sponsored by: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Dues Paid: \$ \_\_\_\_\_ Received by: \_\_\_\_\_

Remarks to Note: \_\_\_\_\_

\_\_\_\_\_

Please forward this Application Form and Membership Dues to our Corresponding Secretary:

Greg Feldman, 263 Mineola Blvd, Mineola, NY 11501

Annual Membership Dues is \$20.00 (Life Membership is \$150.00 until 12/31/21, \$200.00 after 12/31/21).

Check is payable to: "The Fifth Masonic District Association of Manhattan".

*Thank you for supporting and joining the 5th Manhattan District Association*