

Application for Reinstatement Benevolent and Protective Order of Elks of the United States of America

(Please print or use typewriter)

Ι,	, a Member of, a Member of, where the Order of Elks, under the Obligation of the Order, prop	Lodge No of the
Benevolent and Protection reinstatement:	ve Order of Elks, under the Obligation of the Order, prop	ose the following applicant for
Applicant's Name]	[Signature of Proposer]	[Member No.]
Address, City, State & Zip	Code of Proposer]	
Phone Number of Propos	ser] [E-mail of Proposer]	
	under the Obligation of the Order, hereby make ap	plication to be reinstated in
	Lodge No, located in the State of	
1. Name	Spouse's Name Occupat	tion
Home Address		
Mailing Address	[Address, City, State & Zip Code]	
ridinig riddress	[Address, City, State & Zip Code]	
[Home Phone Number	r] [Business Phone Number] [E-I	mail Address]
2. Born in the City of _	, in the County of, located in	n the State of
on theday of _	, in the year of	
3. I was a Member of	Lodge Noin the	e State of
4. I was: dropped	d for nonpayment	granted a Transfer Dimit
5. References:		
(Name, Address, P	hone Number]	
② [Name, Address, P	'hone Number]	
	ay be Reinstated to membership in this Lodge upon payment	of the following:
	Reinstatement Fee \$	
	*Proportionate Dues \$	
	*TOTAL\$	
	onsent that this application may be investigated and	state that I have never been
convicted of a felony (or a misdemeanor involving moral turpitude.	
[Signature of Application	nt] · · [Date]	

*Before Reinstatement, the Applicant shall pay the Reinstatement Fee fixed by the Lodge By-Laws, which may not be less than fifteen (\$15.00) dollars, and the proportionate share of the current dues. [See Section 14.180, Laws of the Order, and current Lodge By-Laws]

Code 560501 • Revised 09/2006

Benevolent and Protective Order of Elks • Grand Lodge

Elks Care - Elks Share