

APPLICATION FOR LIFE MEMBERSHIP

11/ 2010



Date: _____

From: _____ Chapter No. _____

(City)

Enclosed find a check in the amount of \$ _____ (+ \$2.50 for handling charges) in payment of a Life Membership in this Chapter for:

Sister _____

Brother _____

Address: _____

Date of Birth: _____ Place of Birth: _____

Received the Eastern Star Degrees in _____ Chapter No. _____

Located at : _____ on the date of _____.

If this member is an affiliate, give date of affiliation with present Chapter and name of former Chapter:

_____ .

Unless instructed otherwise, the Life Certificate is mailed to the Chapter Secretary.

(Chapter Seal)

Chapter Secretary

(This Section for Grand Chapter Office Use)

Date Request Received _____

Life Membership Number _____

Date of Original Purchase _____ Amount of Original Purchase _____

Certificate _____ Card _____ Ledger _____ Yellow Card _____

Computer _____ Receipt _____