

BELOW IS TO BE FILLED OUT
BY SECRETARY OR
RECORDER. PLEASE MAKE
THREE COPIES (ONE FOR
EACH BODY)

FEEES PAID:

CHECK #: _____

CASH: _____

ROYAL ARCH

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DATE READ DATE ELECTED DATE REJECTED

COUNCIL

--	--	--

DATE READ DATE ELECTED DATE REJECTED

COMMANDERY

--	--	--

DATE READ DATE ELECTED DATE REJECTED

RECORD OF WORK

CHAPTER	COUNCIL	COMMANDERY
M.M.	R.M.	O.R.C.
P.M.	S.M.	O.M.
M.E.M.	S.E.M.	O.T.
R.A.		

NAME _____

PETITION FOR THE
YORK RITE
OF
MINNESOTA



YOUR CONTACTS:

GRAND CHAPTER: 952-948-6702

FOR FURTHER INFO AND A LIST OF
CHAPTERS, COUNCILS AND
COMMANDERIES PLEASE VISIT:

www.yorkrite.com/mn
www.yorkrite.com/membership/html
to see a video

ROYAL ARCH MASONS

CRYPTIC MASONS

KNIGHTS TEMPLAR

