

**New Member Information Card**

\_\_\_\_\_ Council No \_\_\_\_\_

**Frist Name** \_\_\_\_\_ **Last Name** \_\_\_\_\_

**Address** \_\_\_\_\_  
Street city state zip code

**Date of Birth** \_\_\_\_\_ **Occupation** \_\_\_\_\_

**Lodge F&AM No.** \_\_\_\_\_ **RAM No.** \_\_\_\_\_ **Date Elected** \_\_\_\_\_

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