AFRICAN LODGE No. 459 BOSTON, MASSACHUSETTS MEMBERSHIP APPLICATION

		Number:			
			(FOR OI	FFICE USE ONLY)	
Name:					
Address:					
(City)	(S	tate)	(Zip)		
Telephone #					
(Area Code)					
MASONIC JURISDICTION	N (State)				
BLUE LODGE NAME					
BLUE LODGE ADDRESS					
(City)	(S	tate)	(Zip)		
Prince Hall affiliation:	Y N	If no, what is	s your Masonic a	affiliation?	
How should your name appear	r on the membership o	certificate?			
(First Name)	(Middle Initial)	(Last Name)		(Sr., Jr., etc.)	
Membership includes: Cert	ificate, Dues Card, I	•	* *	opy of the	
	FEE:\$1	00.00			

Please make checks/money orders (Do not send cash!) Payable to: AFRICAN LODGE No. 459

MAIL COMPLETED APPLICATION and A COPY OF BOTH SIDES OF YOUR CURRENT DUES CARD ALONG WITH PAYMENT TO:

R.W. Manuel Pires, Chairman African Lodge No. 459 P.O. Box277 Dorchester, MA 02121

Participation Preservation Perpetuation