

YORK RITE FESTIVAL REGISTRATION

PLEASE PRINT ALL INFORMATION LEGIBLY

DATE _____
NAME IN FULL _____
ADDRESS _____
CITY, STATE, ZIP _____
HOME PHONE _____ CELL _____
EMAIL _____
NAME/NO. OF CHAPTER _____ MEMBER? _____
NAME/NO. OF COUNCIL _____ MEMBER? _____
NAME/NO. OF COMMANDERY _____
BLUELODGE AFFILIATION _____
GRAND LODGE ID NO. _____

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