



Squires of The Round Table

Membership Petition

Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell: _____

Email (if possible): _____ Date of Birth: _____

School Attending: _____ Grade: _____

Favorite School Subject(s): _____

Hobbies/Interests: _____

Clubs, Organizations: _____

Church/Synagogue: _____

Father's Name: _____ Mother's Name: _____

Is your father a Senior DeMolay? _____ If so, where? _____

Is your father a Master Mason? _____ If so, where? _____

Is your mother a Majority Rainbow Girl? _____ If so, where? _____

Parent/Guardian Signature: _____

Signature of Applicant: _____

Squires Sponsor's Name and Signature: _____

Signature of Sir Knight: Date: _____

Signature of Manor Advisor: _____