



Membership Application

Independent Order of Odd Fellows

APPLICANT

I, _____, apply to the members of No. _____ of the
Independent Order of Odd Fellows of _____ (location)

I agree to abide by the rules, regulations and teachings of the Order. I understand my rights as a member are protected by the laws of the Order and I agree not to resort to the civil courts for their enforcement. I believe in a Supreme Being and I am loyal to my Country.

Membership: Initiation Transfer Card Associate Birthday _____

Occupation _____ Employer _____

Mailing Address _____

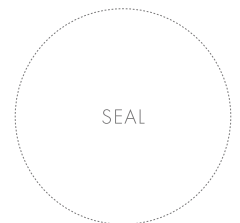
Phone _____ Email _____

Spouse, Parent, or Guardian _____ (if applicable)

Applicant's Signature _____ Date _____

SPONSOR

Name _____ Lodge _____



INTERVIEWING COMMITTEE

We certify that the applicant meets the qualifications
for membership in this lodge.

SECRETARY

I certify that _____
is a member of degree _____ in
good standing in _____ No. _____.

Attest _____