



Deep South Shriners Membership Application



(Please print)

Temple Name: _____ Temple Number: _____
Oasis: _____ Desert: _____
Name: _____ Renewal: ____ New: ____
Deep South Dues Card #: _____

Position in Temple: Potentate Past Potentate Rabban
 Honorary Past Potentate Noble Emeritus

Address: _____
City: _____ State: _____ Zip Code: _____
Mobile Phone #: _____ Home Phone #: _____
Email Address: _____

Preferred method of Communication

Email Text Letter Phone

Dues: (\$10 per year) 2020 2021 2022 2023 2024 2025

Note: If you would like to pay for a different number of years from the ones listed above enter the number of years here _____

Grand Total submitted: \$ _____

Make check or money order payable to "Deep South Shriners" and mail completed application & payment to:

**Deep South Shriners Financial Recorder
Noble Robert J. Datcher
P.O. Box 451892
Garland, Texas 75045**

PLEASE DO NOT WRITE BELOW THIS LINE. OFFICE USE ONLY.

Date Received: _____ Receipt Number: _____

Deep South Shriners Dues Card Number: _____