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Scottish Rite – Valley of Austin affiliation

Full Name _____
(First, Middle, Last)

Birth Date _____ Place of Birth _____

Home Address _____

City, State, Zip _____

Mailing Address _____

City, State, Zip _____

Phone Number _____

Email _____

Name of Blue Lodge _____

Blue Lodge Number _____ Grand Lodge _____

Current Valley _____ Orient _____

SR Member Number _____

Dual Affiliation

Transfer

Signature

Date