Application For Endowed Membership And Installment Payments

I hereby make application for a North Carolina Masonic Lodge Endowed Membership under all the provisions of the Constitution, General Regulations, and Edicts of the Grand Lodge. I certify that I am a member in good standing in the Lodge indicated below. I understand this money will be placed in a trust fund and the interest used to support my lodge and Grand Lodge. I further understand and agree that a condition of this Endowed Membership is that, if accepted, the membership fee is non-refundable. If accepted, I therefore waive any and all rights to reclaim this fee.

		Please Type Or	Print	
	Full Name of Applicant		Date of Application	
	Applio	cant's Lodge and	Number	51
Address of A	Applicant	City	State Zip	
	E	ndowed Member	rship Fee	
	\$Lodge Dues including per capital as of next January 1st \$Lodge Dues including per capital as of next January 1st	X 5.25=	Fee For One (1) time payment (Minimum \$750) \$ Amount of payment if fee is to be paid in five (5) equal installments	Payment Number
	oluntary contribution to increase of my lodge and Grand Lodge	\$		
TOTAL am	ount transmitted to Grand Secreta	ry \$		
	Make chec	k to: Endowed N	Membership Fund	
ATTEST: _	Signature of Lodge Secretary)PE	Signature of Applicant	
	(SEAL)		Date Received by Grand Secretary	
			Applicant's Membership Number	