



INTERNATIONAL ASSOCIATION LEGIONS OF HONOR
APPLICATION FOR REINSTATEMENT

To be submitted to: Divisional Lt. Commander

Date _____

The _____ Shrine Legion of Honor at _____
Name of Shrine City and State

having been originally chartered on _____ hereby makes application for reinstatement into the International Association Legions of Honor and submits the following support information:

Commander: _____

Adjutant: _____

Unit Mailing Address: _____

City _____ State _____ Zip Code _____

Do you have a Drill Team? _____ Number in Drill Team: _____

Do you have any other type of Unit? _____ Its name and number of members? _____

CERTIFICATION OF ELIGIBILITY OF MEMBERSHIP:

I Commander of _____ Shrine Legion of Honor do hereby certify that all members listed are eligible according to the Bylaws of the International Association Legions of Honor.

Signed: _____ Attested: _____
Commander Adjutant

APPROVAL BY THE ILLUSTRIOUS POTENTATE:

I Illustrious Potentate of _____ Shrine endorse this application and recommend reinstatement thereof.

Date: _____ Signed: _____
Illustrious Potentate

To be attached to this Application are:

- (1.) The Annual Dues for the Current Year in the International Association Legions of Honor at \$4.00 USD per member with a minimum due of \$40.00 USD for less than 10 members, regardless of the date and a reinstatement fee of \$100.00
- (2.) A list of Officers with titles and members with address, phone and email contact information.
- (3.) A copy of the signed approved Bylaws.