

1.	First Name:	Middle (In):	Last:	
2.	Preferred Name:			
3.	Address:			
4.	Country: 5. City/Pro	ovince	6. Postal Code:	
7.	Phone: ()		8. Birthdate:	
9.	E-mail:			
	School Attending:			
12.	Favorite School Subject(s):			
13.	Hobbies/Interests:			
	Clubs, Organizations:			
	Church/Place of Worship:			
	15. References: List 2 friends (your age) you have known for one year:			
	Name:	Email:	Phone: ()	
	Name:	Email:	Phone: ()	
17.	DeMolay Sponsor ID:	Sponsor ID: DeMolay Sponsor's Name:		
Му I	Parents/Guardians approve of my joining DeM	olay.		
18.	Parent/Guardian Name:	Parent/Guar	Parent/Guardian Name:	
19.	Is your parent/guardian a Senior DeMolay?	If so, where		
20.	Is your parent/guardian a Mason?	If so, where	?	
	, , , , , , , , , , , , , , , , , , , ,	, , ,	Molay, and live by the virtues and precepts of deship, fidelity, cleanness, and patriotism.	
DeM	Nolay Sponsor Signature:			
Pare	ent/Guardian Signature:			
Арр	licant Signature:			
Your Life Membership Fee of: must accompany this application.				