	INTERNATIONAL ASS APPLICATION	I FOR REINSTA		
LEGION GF HONGR	INTERNATIONAL ASS	in the OCIATION LEG	IONS OI	FHONOR
To be submitted to:				Date
International Adjutant David L. Smith 1018 SW Walter Ave. Lake City, FL 32024	HP: (386) 752-0475 CP: (785) 633-8527 e-mail: adjutant@ialoh.org			
The Name of Shrine	Shrine Legion of Honor at			
Name of Shrine having been originally chartered or the International Association Legio information:	۱	, hereby make	es appĺica	nd State ation for reinstatement in e following support
Commander:				
Occupation:				
Street	City	State Z	ip	Telephone No.
Adjutant:	·····			
Occupation:				
Address:				
Street	City		•	Telephone No.
Number of Members in Unit	Do you have a	Drill Team?		Number in Drill Team:
Do you have any other type of Unit	? Its name a	nd number of m	embers?	
Time and place of Monthly Meeting				
Initiation Fees: \$	Annual Dues \$	Team [Dues \$	Other
Dues: \$				

To be attached to this Application are:

- (1.) A copy of the Constitution and Bylaws of the Unit.
- (2.) A list of the Officers and a roster of the Membership (Names & Addresses)
- (3.) The Annual Dues for the Current Year in the International Association Legions of Honor at \$2.00 USD per member with a minimum due of \$30.00 USD, regardless of the date and reinstatement fee of \$100.00
- (4.) A letter signed by the Illustrious Potentate giving his approval to the organization of the Unit in his Shrine.

CERTIFICATION OF ELIGIBILITY OF MEMBERSHIP:

I _____ Commander _____ Shrine Legion of Honor do hereby Certify that all members listed are eligible according to the Constitution and Bylaws of the International Association Legions of Honor:

SIGNED:

ATTESTED: _____

Adjutant

Commander