



# INTERNATIONAL ORDER OF JOB'S DAUGHTERS

## Petition for Membership

To the Honored Queen, Officers and Members of Bethel No. \_\_\_\_\_ of \_\_\_\_\_ Location \_\_\_\_\_:

I have been informed of the objects and aims of the International Order of Job's Daughters and petition for membership. If I am admitted to membership, I promise to conform to all the laws and regulations of the organization.

THIS SECTION TO BE READ IN BETHEL

Name \_\_\_\_\_ Age \_\_\_\_\_

Home address \_\_\_\_\_

City \_\_\_\_\_ State/Prov./Terr. \_\_\_\_\_

Zip/Postal Code \_\_\_\_\_ Phone \_\_\_\_\_

I claim eligibility to membership in the International Order of Job's Daughters because I am the

\_\_\_\_\_ of \* \_\_\_\_\_, a Majority  
Relationship If a Majority Member, include maiden name

Member/a Master Mason in good standing in \_\_\_\_\_ at \_\_\_\_\_  
Lodge Name and No. or Bethel No. Location

\_\_\_\_\_, or who was in good standing at the time of death, or so related to his wife or widow.

Signature of your recommenders \_\_\_\_\_  
Member of the Bethel

and \_\_\_\_\_  
A Master Mason or a woman of proper Masonic relationship

The initiation fee of \$ \_\_\_\_\_ accompanies this petition.

Place and date of birth \_\_\_\_\_

I have resided in this State/Province/Territory/country since \_\_\_\_\_

I attend school at \_\_\_\_\_

Father's full name \_\_\_\_\_ Address if different \_\_\_\_\_

Mother's full name \_\_\_\_\_ Address if different \_\_\_\_\_

I attend church at \_\_\_\_\_

Have you previously petitioned a Bethel of Job's Daughters? \_\_\_\_\_

If rejected, state number and location of Bethel \_\_\_\_\_

\*Address of person through whom you claim eligibility \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_ Petitioner

I approve and consent to the filing and reading of this petition, subject to the laws, rules and regulations of the International Order of Job's Daughters.

\_\_\_\_\_ Parent or Guardian

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**FOR BETHEL USE, IF REQUIRED**

No. \_\_\_\_\_

Bethel No. \_\_\_\_\_

**PETITION OF**

\_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_

**Referred to**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date action taken \_\_\_\_\_

Date Initiated \_\_\_\_\_

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