



MEMBERSHIP APPLICATION

On receipt immediately scan and email copy to [coy-sec @demolay.org.au](mailto:coy-sec@demolay.org.au)

If you want an electronic DeMolay ID Card, please attach a good quality passport-style colour photograph.

Date	<input type="text"/>	
Full name	Family name	Given name / s
DeMolay Chapter	<input type="text"/>	
Date of Birth	<input type="text"/>	Age (Years / Months) <input type="text"/>
Address	<input type="text"/>	
	State	Postcode
Home phone	<input type="text"/>	Mobile <input type="text"/>
Email address	<input type="text"/>	
School	<input type="text"/>	
OR		
Employer	<input type="text"/>	Occupation <input type="text"/>
Name / s of any Masonic relatives	<input type="text"/>	
Other clubs etc	<input type="text"/>	
Hobbies	<input type="text"/>	

Declarations by Applicant and / or Parent / Guardian (as applicable)

I freely and voluntarily offer myself as a candidate for membership of DeMolay Australia. Should this application be successful, I promise to cheerfully comply with the rules, regulations, and edicts of DeMolay Australia and all its subsidiary and other bodies (collectively known as DeMolay Australia) and the By-Laws of the Chapter I am joining. I also promise that the information contained in this application is true and correct.

I profess a belief in a Supreme Being.

I have been given a copy of DeMolay Australia's Statutes and Chapter Regulations, Privacy Policy, Child Protection & Youth Management Strategy, Code of Conduct and Ethics and Membership Eligibility Policy and have read and understood the contents of the documents and agree to be bound by them.

I authorise DeMolay Australia to:

- use my / my child's photographs and images as detailed in the above Privacy Policy; and
- transport my child to and from DeMolay activities as detailed under "Transportation Guidelines" in the above Child Protection & Youth Management Strategy.

Applicant signature (mandatory)
<input type="text"/>

Parent / Guardian signature (for applicants under 18 years of age)
<input type="text"/>
Full name:
Contact phone number:

We cheerfully recommend the applicant for membership of DeMolay Australia and know of no reason that would prevent him from joining.

Proposer's signature (mandatory)
<input type="text"/>
Full name:
DeMolay Chapter:
Contact phone number:

Seconder's signature (mandatory)
<input type="text"/>
Full name:
DeMolay Chapter:
Contact phone number: