APPLICATION FOR HONORARY PERPETUAL MEMBERSHIP

This is to certify that I,	, hereby make application
	n Lodge # in
the name of(print FULL name)	
I understand that the Honorary Membership Fee will be placed in a trust fund and the income from that fund will be used to support this Arkansas Lodge and the Grand Lodge of Arkansas. I further understand and agree that a condition of this Honorary Perpetual Membership is that if accepted, the Honorary Membership Fee, as well as any additional voluntary contributions made to this fund, is NON-REFUNDABLE. If this application for Honorary Perpetual Membership is accepted, I voluntarily waive any and all rights to reclaim any contribution, now or in the future, made to the Perpetual Membership Trust Fund.	
Signature of Applicant	\$ Honorary Membership Fee*
Date	* Make checks payable to: Perpetual Membership Trust Fund. Minimum Fee is \$25.00.
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Secretary	
Date	-

(Seal)