Class Directors Application

Name			Lady
	Middle City	Last	State / Province
			Children
Occupation			
Date of Birth			
1. Have you served in Milita	ry Service? Yes	_ No Branch _	Rank
	usical instrument?	YesNo	If yes, what instrument:
			No What
			hat:
5. Are you a licensed airplane 6. Are you CPR or Medically 7. Were you a De Molay? Ye 8. Do you play golf? Yes 9. Would you be interested in	trained? Yes sNoBoy S NoBowl: Y joining a Shrine U	No Are you consider the second of the se	Rank achieved ide a horse: Yes No If yes, what Unit?
0. Would you be interested in	joining a Shrine C	Club? Yes No	If yes, What Club?
1. How can the Shrine best se	rve your needs and	d desires	
2. If you get involved, what an	ea of interest wou	ld you like to expl	ore
3. Do you have a friend who v			
lis name			
hone number			
he now working in degree wo	ork Is he	a Master Mason	