

**Petition for Reinstatement**  
**Ancient and Accepted Scottish Rite**  
**Of Freemasonry**

Southern Jurisdiction USA – Valley of Tampa – Orient of Florida  
 Street Address: 5500 Memorial Highway, Tampa, Florida 33634-7336 Phone: 813-886-0578

**TO THE OFFICERS AND MEMBERS OF:** \_\_\_\_\_, 20\_\_

TAMPA LODGE OF PERFECTION  
 TAMPA CHAPTER – KNIGHTS OF ROSE CROIX  
 TAMPA COUNCIL – KNIGHTS KADOSH  
 TAMPA CONSISTORY

Located in the Valley of Tampa, Orient of Florida, under obedience to the Supreme Council of the Thirty-Third Degree of the Ancient and Accepted Scottish Rite of Freemasonry for the Southern Jurisdiction of the United States of America.

I, the undersigned, (PRINT NAME HERE) \_\_\_\_\_ am desirous of becoming reinstated to membership and sincerely request that I may be received among you. I will ever pray for the prosperity and glory of the Fraternity and the Welfare of the Brethren.

| I WAS FORMERLY A MEMBER OF: |                             |
|-----------------------------|-----------------------------|
| Blue Lodge:                 | No. _____ Located at: _____ |
| Lodge of Perfection:        | Located at: _____           |
| Chapter of Rose Croix:      | Located at: _____           |
| Council of Kadosh:          | Located at: _____           |
| Consistory:                 | Located at: _____           |

**I AM NOW A MEMBER IN GOOD STANDING OF:**

\_\_\_\_\_ (Blue) Lodge, No. \_\_\_\_\_, Located at: \_\_\_\_\_

as attested by the attached letter or certificate from the Secretary of my Blue Lodge, under seal of the Lodge, or by my Membership Card, enclosed herewith, which Membership Card is to be returned to me as soon as it has served its purpose of establishing my Masonic standing upon the records of the Rite.

My reasons for desiring reinstatement are as follows: \_\_\_\_\_

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

Mailing Address: \_\_\_\_\_

Home Telephone No. (\_\_\_\_\_) \_\_\_\_\_ Business Telephone No. (\_\_\_\_\_) \_\_\_\_\_

My Occupation is: \_\_\_\_\_ Retired: Yes \_\_\_ No \_\_\_

I have read carefully the above petition and have answered all questions and expressed my wishes in truth and sincerity and in my own handwriting.

RECOMMENDED BY TWO MEMBERS OF THE TAMPA BODIES

Signed \_\_\_\_\_  
 (FULL NAME – DO NOT USE INITIALS)

\_\_\_\_\_  
 \_\_\_\_\_

This petition must be accompanied by a fee  
 of \$ 118.00 (includes current year's dues)