

FORM 10S

This statement is to be sent to the Director of Missouri Squires within 10 days after the degrees are conferred
 This form should also be used to report any change in a current squire member status

Manor _____

Sponsored by _____

Located in _____

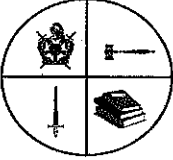
Last Name First Name Middle Name

1	Name (in full)	_____	Birth Date (mm/dd/yyyy)	_____	Initiation Date (mm/dd/yyyy)	_____
	Mailing address	_____				
	City, State, Zip	_____	Name of 1st line signer of petition			
	Parent's Name (in full)	_____				
	Mailing address	_____	Father Senior DeMolay			
	City, State Zip	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No			

2	Name (in full)	_____	Birth Date (mm/dd/yyyy)	_____	Initiation Date (mm/dd/yyyy)	_____
	Mailing address	_____				
	City, State, Zip	_____	Name of 1st line signer of petition			
	Parent's Name (in full)	_____				
	Mailing address	_____	Father Senior DeMolay			
	City, State Zip	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No			

3	Name (in full)	_____	Birth Date (mm/dd/yyyy)	_____	Initiation Date (mm/dd/yyyy)	_____
	Mailing address	_____				
	City, State, Zip	_____	Name of 1st line signer of petition			
	Parent's Name (in full)	_____				
	Mailing address	_____	Father Senior DeMolay			
	City, State Zip	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No			

4	Name (in full)	_____	Birth Date (mm/dd/yyyy)	_____	Initiation Date (mm/dd/yyyy)	_____
	Mailing address	_____				
	City, State, Zip	_____	Name of 1st line signer of petition			
	Parent's Name (in full)	_____				
	Mailing address	_____	Father Senior DeMolay			
	City, State Zip	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No			

<p>This form is sent to:</p> <p><input type="checkbox"/> Director of Squires</p> <p><input type="checkbox"/> Your Chapter File</p> <p>Chad Arnold, Director of Missouri Squires 514 N 24th St. Joseph, MO 64501</p>		<p>All Correspondence and patents should be sent to:</p> <p>Name _____</p> <p>Address: _____</p> <p>City, State, Zip _____</p> <p>Phone: _____</p>
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