



THE MOST EXCELLENT GRAND CHAPTER OF HOLY ROYAL ARCH MASON OF
NORTH CAROLINA AND JURISDICTION, INC.

APPLICATION FOR REPLACEMENT DUES CARD

NAME _____

ADDRESS _____

CITY _____, NC ZIP CODE _____

PHONE NUMBER HOME (_____) _____

PHONE NUMBER CELL (_____) _____

EMAIL ADDRESS _____

CHAPTER NAME _____ NUMBER _____

DISTRICT _____ REGION _____ CAPITULAR YEAR 20 _____

REQUEST THE FOLLOWING DUES CARD (SELECT APPROPRIATE CARD)

___ PMEGHP DUES CARD - \$10

___ COMPANION DUES CARD - \$10

___ PAST HIGH PRIEST DUES CARD - \$10

_____ DATE _____

SIGNATURE OF COMPANION

TO BE COMPLETED BY THE CHAPTER

THE ABOVE COMPANION WAS SUBMITTED ON THE LAST ANNUAL CHAPTER
REPORT OR A SUPPLEMENTAL REPORT AND HIS GRAND CHAPTER TAXES
WERE PAID.

PRINTED NAME OF SECRETARY

PRINTED NAME EXCELLENT HIGH PRIEST

SECRETARY SIGNATURE

EXCELLENT HIGH PRIEST SIGNATURE

CHAPTER SEAL