

PPLICATION FOR M	EMBERSHIP IN	THE SHRINE'S	LEADING UNI

KOPPERS

APPLICANT'S NAME: PLEASE PRINT ALL INFORMATION LEGIBLY					
LAST		FIRST	_INITIAL		
AGE	BIRTHDAY	LADY'S NAME			
MAILING ADDI	RESS: (preferred □)				
STREET	CITY	COUNTY	ZIP		
BUSINESS ADDRESS: (preferred □)					
STREET	CITY	COUNTY	ZIP		
PHONE:					
HOME()	BUSINESS ()CELL()			
EMAIL		@			
OTHER SHRINE AFFILIATIONS:					
SHRINE UNIT/CLU	3				
TEMPLE APPOINT	MENTS				

I realize that Koppers is a marching unit and staying physically fit and able to participate in the parades is an important part of my membership obligation. I understand the Koppers meet on the third Thursday of each month, and I will participate in all Unit and Temple Call Outs, including but not limited to the Potentate's Gala, three parades, and four quarterly stated Temple meetings. Attendance at all these activities is **mandatory**, with fines and expulsion from the Unit possible for non-participation. I agree to comply with all of these conditions, and understand that if accepted into the Unit, I will serve a minimum of one year as a **Probationary Member of the Unit.**

Promotion to Regular Member is based on attendance at all functions, volunteering for work details, enthusiasm, and attitude.

SIGNATURE DATE

PROPOSED BY

RECOMMENDED BY

APPLICATION MUST BE ACCOMPANIED BY A CHECK FOR \$350.00, PAYABLE TO AI Malaikah Koppers. This check covers the cost of the small Koppers Badge, Koppers dress mess jacket, cummerbund, bow tie, and first year's dues [\$150].