



**Zalika Youth Palace No.28A**  
of JEAN'S CHOICE COURT NO.28A HEROINES OF JERICHO  
[hojycourt@gmail.com](mailto:hojycourt@gmail.com)

**APPLICANT INFORMATION**

Name:

Date of birth:

Home Phone:

Cell Phone:

Current address:

City:

State:

ZIP Code:

School Attending:

Grade:

Email:

**EMERGENCY CONTACT**

Parent/Guardian:

Address:

Phone:

City:

State:

ZIP Code:

Name, Address and Phone of a relative not residing with you:

**APPLICANT**

Favorite School Subject(s):

Clubs/Organizations:

Jkj;

Hobbies:

Medical Illness: (list)

**REFERENCES (2) YOUR AGE (1) ADULT NOT YOUR PARENT**

Name

Address

Phone

1.

2.

Adult:

**MY PARENTS/GUARDIANS APPROVE OF MY JOINING ZALIKA PALACE NO. 28A**

Fathers Name:

Lodge #

Mothers Name:

Chapter/Court #

Masonic Sponsor's Name & Lodge/Chapter #

**SIGNATURES**

Applicants & Parents must sign the application. If the applicant is under the age of 12 the application must be sign in the following manner: Child must print s name and the adult signs along side the printed name.

Signature of Applicant:

Date:

Signature of Parent:

Date:

Signature of Parent:

Date:

Signature of Sponsor:

Date:

Approved Date: \_\_\_\_\_ Initiated: \_\_\_\_\_ MM/SM/FJ \_\_\_\_\_