



Application for Fifty Year
Membership Certificate and Pin

To the Grand Chapter of Tennessee
Must be mailed to Grand Secretary by July 1

The undersigned verifies that (Mrs., Ms. or Mr.) _____
is a member in good standing of _____ Chapter No. _____
located at _____
She or He was initiated in _____ Chapter No. _____
Located at City: _____ State: _____
Date Initiated: _____ under the name of _____
Woman's name at initiation

She or He Transferred _____
 Demitted _____
 Affiliated _____
 Suspended _____
 Restored _____

*If any of the above applied, please state the dates, chapters or give any pertinent information.

We recommend this member for Fifty Year Certificate and Pin from the Grand Chapter to be presented in our chapter meeting.

Secretary

Affix
Chapter Seal

Date