Applicant Background Waiver

Name:	First	Middle	Last
Current Address:	Street	Street Apt/Suite	
	City	State	Zip Code
Date of Birth:	${\text{Month}} \frac{/}{\text{Day}}$	Year / Year	
Social Security No.:	:		
Three Degrees of company or indivicivil court history, all information obtinappropriate by tworshipful Grand is justification for of action against Masons of Florida	Freemasonry, idual they deem character and quained as a result he Lodge as ha Lodge of Free at the rejection of the Lodge, The their officers of the their officers of the Lodge, their officers of the Lodge of	for Dual Membership or appropriate to investigat ualifications. I further co of this investigation. I und aving possible adverse ef and Accepted Masons of Fl my Petition. I hereby was Most Worshipful Grand	ave submitted a Petition for the for Affiliation, to contact any e my background, criminal and nsent to their review of any and derstand that any matter deemed fects on the Lodge, The Most orida or Freemasonry as a whole live my right to bring any cause Lodge of Free and Accepted n, invasion of privacy or for any f my Petition.
	Signature		Date
	nd is not refund		\$15.00. Payment must be made a elivered to the Petitioner at the
ГО BE SIGNED AF	TER RETURN	OF THE CRIMINAL BA	ACKGROUND INVESTIGATION
I acknowledg this number has been red	ge receipt of the s day of acted**.	original criminal backgro , and acknown	ound investigation obtained by wledge that my social security
		Signature	
** Unon the execut	tion of the receipt :	portion of this form by the Peti	tioner you are to redact (delete the first

** Upon the execution of the receipt portion of this form by the Petitioner, you are to redact (delete the first five numbers) of the Petitioner's social security number and retain this form in the lodge file.