MOOSEHAVEN ADMISSIONS ELIGIBILITY QUESTIONNAIRE

If you are interested in living at Moosehaven, please complete this form and give it to your Administrator/Recorder for submission to Moosehaven. All applicants are to be sponsored by their Lodge/Chapter as the first step in the application process.

Please be aware, this is not a formal application.

| Dear Administrator/Recorder: Please help me/us to determin | e eligibility for potential Moos | ehaven admission: | | |
|--|--|--------------------|--------------------|--|
| Applicant's Full Name | | | | |
| Address | City | State | Zip | |
| Telephone Home () | Cell (| _) | | |
| Applicant's Date of Birth | | | | |
| Moose ID# | Date joined Lodge or Chapter | | | |
| Number of years in good stand | ding | | | |
| If transferred into Lodge or Ch | apter, date of transfer: | | | |
| Name and number of Lodge o | r Chapter transferred from | | | |
| If married, Spouse's full name | | | | |
| Spouse's Date of Birth | Date of Ma | rriage | | |
| TO ES | TABLISH ELIGIBILITY FOR A WIL | DOW / WIDOWER | | |
| Deceased husband/wife's full | name | | | |
| Date of marriage | Date of Birth | BirthDate of Death | | |
| Member of Lodge or Chapter_ | | Lodge/Chapter # | | |
| City | Stat | e | _ | |
| Date he/she joined Lodge or C | Chapter | | | |
| Number of years of continuou | s membership preceding dea | th | | |
| ******** | ******* | ****** | ****** | |
| Administrator/Recorder, pleacompleted form to: | ase provide <u>your</u> Lodge/Cha Admissions Office, Mooseha 1701 Park Ave. Orange Park, FL 320 | ven Inc., | below and mail thi | |
| Administrator/Recorder/Contact | ct Name | | | |
| Lodge/Chapter name | | Number | | |
| Mailing address | City | State | Zip | |
| Phone (| () | | | |
| Email | | | | |