

Fees and Dues for Receiving the degrees, 4th through 32nd inclusive, of the Ancient and Accepted Scottish Rite in the Valley of Kansas City, Orient of Missouri:

Initiation Fees: \$200.00 *(Must accompany the petition.)*
Includes 32° Patent, Bridge to Light Book, Reunion Meals

Current Year Dues for Spring Candidates or Next Year's
Dues for Fall Candidates: \$150.00
(May be paid at the beginning of the Reunion.)

Scottish Rite 32° Cap: \$60 *(Optional)*

Cap Case \$30: *(Optional)*

Master Craftsman Course: \$40 *(Optional)*

Cap Size: *(if ordering Scottish Rite Cap):* _____

All Fees and Dues may be paid to the Valley of
Kansas City by check or credit card. (VISA or
MasterCard) by phone through Business Office.

Please include your credit card information,
below, to use this payment method or call 816-561-2277
ext 0

Card Type

Credit Card Number

Name on Card

Expiration Date

Office Use:

Date Presented: ____/____/____

Date Elected: ____/____/____

Amount Submitted: \$ _____

Balance due at Reunion: \$ _____

Date: ____/____/____

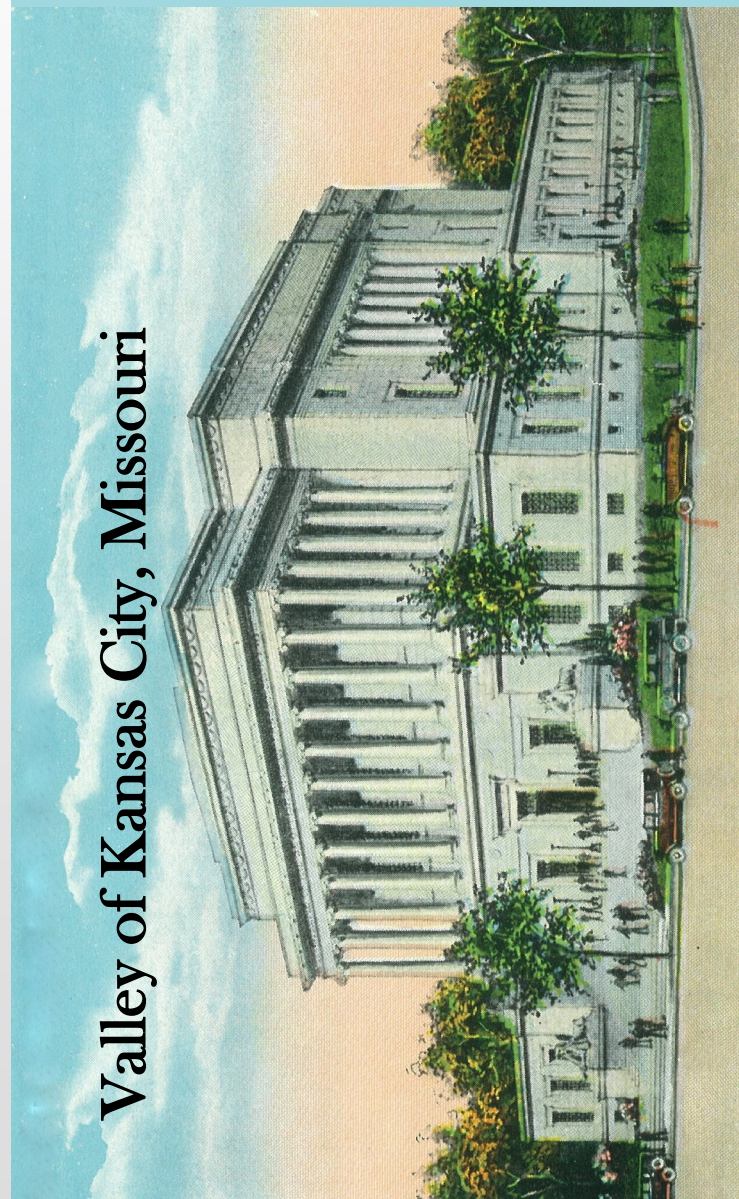
VALLEY OF KANSAS CITY, A.A.S.R.

1330 E. Linwood Boulevard
Kansas City, MO 64109
Phone: (816) 561-2277

E-mail: Secretary@srkc.org
Website: SRKC.org

Revision Date: January 17, 2024

Scottish Rite Petition for the Degrees



Ancient and Accepted Scottish Rite of Freemasonry, Southern Jurisdiction of the United States of America,

Valley of Kansas City, Orient of Missouri



To the officers and members of the Ancient and Accepted Scottish Rite of Freemasonry, in the Valley of Kansas City, Orient of Missouri, I do hereby respectfully petition for the degrees, from the 4th to 32nd inclusive, and I promise always to bear true faith and allegiance to the Supreme Council of the Thirty-third Degree for the Southern Jurisdiction of the United States.



PERSONAL INFORMATION

Name: _____
First Middle Last (Please print name in full - do not use initials or nicknames)

Address: _____
Street City State 9 Digit Zip Code

Place of Birth: _____ Date of Birth: _____ Email Address: _____
Town/County/State Month/Day/Year

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Occupation/Profession: _____ Employed by: _____
If retired, indicate from what profession If retired, indicate from what firm

Lady's First Name: _____ If ordering Scottish Rite Cap, Cap Size: _____

MASONIC INFORMATION

I am a Master Mason in good standing in:

_____ Lodge # _____ A.F. & A.M. Located at: _____
(City/State)

Have you ever petitioned any Scottish Rite Body? Yes ___ No ___ (If Yes Where? _____)

ALLEGIANCE STATEMENT

The Supreme Council requires acceptance of the following fundamental principles: The inculcation of patriotism, respect for law and order, undying loyalty to the principles of civil and religious liberty, and the entire separation of church and state as set forth in the Constitution of the United States of America. Do you approve wholeheartedly of these principles? if Yes ___ if No ___

FEES & DUES

The total fees and dues for the Ancient and Accepted Scottish Rite Valley of Kansas City are explained on the reverse of this form.

The initiation fee of \$180.00 must accompany this Petition with the balance of the fees due at the start of the Reunion.

Sign name in full below (Do not use initials) Date _____ Fee Enclosed _____

Signature

This candidate is recommended for membership by the following members of the Kansas City Valley A.A.S.R. (2 Required)

1. _____
Printed Name and Signature

2. _____
Printed Name and Signature