



MOST WORSHIPFUL PRINCE HALL GRAND LODGE OF

FREE & ACCEPTED MASONS OF NORTH CAROLINA & JURISDICTION, INC.

THE MOST WORSHIPFUL PRINCE HALL GRAND LODGE OF FREE AND ACCEPTED MASONS OF NORTH CAROLINA AND JURISDICTION, INC. APPLICATION FOR REINSTATEMENT

PURPOSE. The Application for Reinstatement is the process in which an un-affiliated Master Mason may re-establish his affiliation with a constituent lodge of and with the Most Worshipful Prince Hall Grand Lodge of Free and Accepted Masons of North Carolina and Jurisdiction, Inc.

An Application for Membership requires a National Background Check, an Investigation Committee report and a 2/3 vote of the present voting membership at the respective lodge communication.

Master Masons approved for reinstatement who are eligible for benevolence have their benevolence start time begin at the time their reinstatement is approved. If an eligible Master Mason desires his benevolence, he must complete and apply for Restoration, MWPHGLNC Form 4.

Supplemental Reports for reinstated Master Masons are due to the Office of the Grand Secretary thirty (30) days after the vote to reinstate passes.



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APPLICATION FOR REINSTATEMENT

I, _____, SUBMIT THIS APPLICATION OF
REINSTATEMENT TO THE BROTHERS OF _____
LODGE NUMBER _____, LOCATED IN THE CITY OF _____, NC.
I BECAME A MASTER MASON IN _____ LODGE NUMBER _____. I
BECAME AN UN-AFFILIATED MASON (DATE) _____ DUE TO

_____.

THE FOLLOWING INFORMATION IS ACCURATE AND CORRECT.

APPLICANT ADDRESS _____

CITY _____, NC ZIP CODE _____

APPLICANT PHONE NUMBER HOME (_____) _____

APPLICANT PHONE NUMBER CELL (_____) _____

APPLICANT EMAIL ADDRESS _____

APPLICANT MARITAL STATUS (CHECK STATUS)

___ SINGLE ___ MARRIED ___ SEPERATED ___ DIVORCED ___ WIDOW

WIFE NAME _____

NUMBER OF CHILDREN _____ SON(S) ___ DAUGHTER(S) ___

SON(S) NAME(S) _____

DAUGHTER(S) NAME(S) _____

APPLICANT EMPLOYMENT STATUS (CHECK STATUS)

___ EMPLOYED ___ RETIRED ___ UNEMPLOYED

APPLICANT PROFESSION _____

APPLICANT EMPLOYER _____

EMPLOYMENT ADDRESS _____

CITY _____ STATE ___ ZIP CODE _____

SUPERVISOR _____

SUPERVISOR PHONE NUMBER (____) _____

HAVE YOU EVER BEEN CONVICTED OF A FELONY? ___ YES ___ NO

IF YES, CHARGE _____ DATE OF CONVICTION _____

ARE YOU AFFILIATED WITH THE NAACP? ___ YES ___ NO

ARE YOU A REGISTERED VOTER? ___ YES ___ NO

I UNDERSTAND REINSTATEMENT DOES NOT INCLUDE RESTORATION OF
BENEVOLENCE.

DATE _____

SIGNATURE OF APPLICANT



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REPORT OF THE INVESTIGATION COMMITTEE
APPLICATION FOR REINSTATEMENT

DATE _____, 20____

TO THE WORSHIPFUL MASTER, WARDENS AND BROTHERS OF
_____, LODGE NUMBER _____. WE THE INVESTIGATION
COMMITTEE PROVIDE THE FOLLOWING REPORT. WE INVESTIGATED:

___ MR. _____ FOR MEMBERSHIP

HE RESIDES AT ADDRESS _____

CITY _____, NC ZIP CODE _____

PHONE NUMBER HOME (_____) _____

PHONE NUMBER CELL (_____) _____

EMAIL ADDRESS _____

HIS MARITAL STATUS IS

___ MARRIED ___ SEPERATED ___ DIVORCED ___ WIDOW

WIFE NAME _____

NUMBER OF CHILDREN _____ SON(S) ___ DAUGHTER(S) ___

SON(S) NAME(S) _____

DAUGHTER(S) NAME(S) _____

EMPLOYMENT STATUS

___ EMPLOYED ___ RETIRED ___ UNEMPLOYED

PROFESSION _____

APPLICANT EMPLOYER _____

EMPLOYMENT ADDRESS _____

CITY _____ STATE ___ ZIP CODE _____

HE BECAME AN UN-AFFILIATED MASON (DATE) _____ DUE TO

HAS A NATIONAL BACKGROUND CHECK BEEN COMPLETED? ___ YES ___ NO



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DO YOU BELIEVE IN A DEITY? YES NO

HAVE YOU EVER BEEN CONVICTED OF A FELONY? YES NO

IF YES, CHARGE _____ DATE OF CONVICTION _____

ARE YOU AFFILIATED WITH THE NAACP? YES NO

ARE YOU A REGISTERED VOTER? YES NO

HIS WIFE SUPPORTS HIS JOINING/RETURNING TO THE LODGE. YES NO

HIS WIFE HAS THE FOLLOWING CONCERNS: _____

THE COMMITTEE OFFERS THE FOLLOWING COMMENTS/REPORT:

WE RECOMMEND

- ACCEPT FOR REINSTATEMENT
 DO NOT ACCEPT FOR REINSTATEMENT

COMMITTEE MEMBER

PRINTED NAME _____

SIGNATURE _____

DATE _____

COMMITTEE MEMBER

PRINTED NAME _____

SIGNATURE _____

DATE _____

COMMITTEE MEMBER

PRINTED NAME _____

SIGNATURE _____

DATE _____



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MASTER MASON SUPPLEMENTAL REPORT
THIS FORM IS FOR REINSTATED MASONS**

NAME _____
 LODGE NAME _____ NUMBER _____
 DISTRICT NUMBER _____ REGION _____
 DATE OF BIRTH _____ DATE RAISED _____ INITIATED _____ PASSED _____
 ADDRESS _____
 CITY _____ STATE _____ ZIP CODE _____
 PHONE _____ EMAIL _____
 BENEFICIARY (PRIMARY) _____
 RELATIONSHIP _____ PHONE _____
 BENEFICIARY (SECONDARY) _____
 RELATIONSHIP _____ PHONE _____

MASTER MASON SUPPLEMENTAL REPORT FEES

****THESE ARE THE FEES DUE FOR THE INDIVIDUAL BROTHER. LODGES CAN SUBMIT ALL FEES FOR THE BROTHERS REINSTATEMENT WITH TWO CHECKS. ONE FOR GRAND LODGE TAX AND ONE FOR BENEVOLENCE****

4010 BENEVOLENCE TAX (\$12)			\$ _____
JANUARY-\$12	FEBRUARY-\$11	MARCH-\$10	APRIL-\$9
MAY-\$8	JUNE-\$7	JULY-\$6	AUGUST-\$5
SEPTEMBER-\$4	OCTOBER-\$3	NOVEMBER-\$2	DECEMBER-\$1
FEE DUE IS BASED ON MONTH RAISED			
4030 GRAND LODGE TAX (\$12)			\$ _____
JANUARY-\$12	FEBRUARY-\$11	MARCH-\$10	APRIL-\$9
MAY-\$8	JUNE-\$7	JULY-\$6	AUGUST-\$5
SEPTEMBER-\$4	OCTOBER-\$3	NOVEMBER-\$2	DECEMBER-\$1
FEE DUE IS BASED ON MONTH RAISED			
4025 DISTRICT DEPUTY TAX (\$1)			\$ 1
4035. KNIGHTS OF PYTHAGORAS TAX			\$ 2
(\$2) 4020 ST. JOHN'S DAY/CCH (\$2)			\$ 2
4040 PRINCE HALL DAY TAX (\$1)			\$ 1
4060 APPLICATION FEE (\$17)			\$ 17
TOTAL			\$ _____

NOTE: SUPPLEMENTAL REPORTS ARE DUE THIRTY (30) DAYS AFTER REINSTATEMENT.