APPLICATION TO THE MASONIC WIDOWS AND ORPHANS' HOME OF TENNESSEE FUND

Lodge complete front and reverse side, after going over rules with applicant.	100 Seventh Avenue North Nashville, Tennessee 37203
	Lodge No
	Tennessee
To the Board of Control, N	lasonic Widows and Orphans' Home of Tennessee Fund:
	Brother(is) (was)
(check appropriate block):	losse who was reised in a Terresson I adapt and (is) (was) continuously a
	lason, who was raised in a Tennessee Lodge and (is) (was) continuously a good standing.
has been int	ason, who was raised in a Tennessee lodge, and whose membership therein terrupted, but who (has been) (was continuously) for 5 years previous to (death) a member in good standings.
3. A Master M continuously	Mason, raised in other than a Tennessee lodge, who (has been) (was <i>i</i>) for five years a member in good standings in a Tennessee lodge.
The applicant is wort children able to suppo	thy and in needy circumstances and is unable to earn a living, and has no ort him or her.
We certify that the an	swers to the questions below are correct.
1. Total number of m	nembers as per last Grand Lodge Report?
2. Yearly dues?	
	own the lodge building?
	odge dues paid?
	ef work was done in the last twelve months by your Lodge?
6. Have you a Relief	For Charity Committee?
7. How many person	s receive help from the Grand Lodge through your Lodge?
8. Have the brethren	of your lodge been apprised of the needy plight of this applicant?
9. Have they been gi	ven the opportunity to assist to the end of their means?
10. If so, what amoun	t is known to have been collected and presented?
11. Has lodge resourc	es been made available for the benefit of this applicant?
	(see Grand Lodge Code provision 7.108)
12. If so, in what amo	unt?
13. If not, why not?	

Master

RULES

1. Application for assistance by a lodge shall be made on forms furnished by the Secretary of the Board of Control, accompanied by the recommendation of said lodge, signed by the Master and Secretary, together with the seal of the lodge affixed.

2. All applications must be thoroughly examined and answered in detail and when completed shall be mailed to the Secretary of the Board of Control. The Secretary of the Board of Control will investigate same and report his findings to the Board of Control at a regular or called meeting or to an executive committee.

3. No applicant will be enrolled for assistance until after approval by the board or executive committee.

4. The applicant must be the worthy wife, widow or minor of a Master Mason who is, or was at the time of his death, a member in good standing of a Tennessee Lodge; or a Master Mason who was raised in a Tennessee Lodge and has been continuously thereafter a member in good standing of a Tennessee Lodge; or a Master Mason who was raised in a Tennessee Lodge and whose membership in a Tennessee Lodge has been interrupted thereafter, but who has been continuously for five years previous to filing his application a member in good standing of a Tennessee Lodge; or a Master Mason who was raised in other than a Tennessee Lodge but who has been continuously

for five years previous to filing his application a member in good standing of a Tennessee Lodge.

- 5. The applicant must be unable to earn a living and without sufficient funds.
- 6. The applicant must be of good character and habits.
- 7. The board or executive committee shall retain the right to withdraw assistance from any beneficiary.
- 8. The acceptance of an applicant for assistance will be made known to the lodge making the application by the Secretary of the Board of Control.
- 9. The Board of Control or executive committee reserves the right to reject any application.
- 10. The rules of this application must be read or explained to the applicant. Every blank must be plainly and careful completed.
- 11. The seal of the Lodge must be affixed.

APPLICANT'S AGREEMENT

In consideration of being accepted s a beneficiary of the Masonic Widows' and Orphans' Home of Tennessee Fund, I do hereby agree to abide by all the rules and regulations in force at this time or which may hereafter be made.

Witness

Signed by Applicant