



# PETITION FOR REINSTATEMENT

Date: \_\_\_\_\_

To the members of \_\_\_\_\_ Temple No. \_\_\_\_\_ Daughters of the Nile.

The undersigned, a former member of \_\_\_\_\_ Temple No. \_\_\_\_\_ dropped for non-payment of dues, solicits reinstatement.

Recommended by:

Applicant Signature: \_\_\_\_\_

1. \_\_\_\_\_
2. \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Prov: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_

.....  
Date Presented: \_\_\_\_\_

Please complete and return to:

Reinstatement Fee of \$ \_\_\_\_\_  
must accompany this request. Please make check payable to: \_\_\_\_\_ Temple No. \_\_\_\_\_