

DISPENSATION REQUEST

LODGE NAME: _____ NO.: _____

DATE: _____

DISTRICT NO.: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

FUNCTION: _____

EVENT/AFFAIR: _____

PURPOSE: _____

DATE: _____

TIME: _____

LOCATION: _____



CITY: _____ STATE: _____ ZIP CODE: _____

MISCELLANEOUS/INFO: _____

MASONIC REGALIA: YES _____ NO _____

IF YES, HOW LONG (EXPLAIN): _____

• DEGREE WORK:

INITIATION..... Over Seven (7) _____ \$3.50 Basic cost and \$1.00 each over seven
PASSING..... Over Five (5) _____ \$3.50 Basic cost and \$1.00 each over five
RAISING..... Over Three (3) _____ \$3.50 Basic cost and \$1.00 each over three

• COLATION INFO:

ALCOHOL BEVERAGES: SOLD _____ SERVED _____ CONSUMED _____
WHO IS PROVIDING THE ALCOHOL BEVERAGES: (Check Appropriate Block)
LODGE _____ CATERER _____ BYOB _____ N/A _____

FEE ENCLOSED: \$ _____ NO FEE REQUIRED: _____

• APPROVED/DISAPPROVED:

District Deputy Grand Master DATE

Secretary DATE

• COMMENTS: _____

Worshipful Master DATE

↑ PLACE LODGE SEAL HERE ↑