



(SAN LUIS OBISPO AND SANTA BARBARA COUNTIES)

Ill. Maurice Sourmany, 33°
Personal Rep S.G.I.G.

Ill. Frank Loui, 33°
Sovereign Grand Inspector General in California

Ill. E. Floyd Griffin, 33°
General Secretary

PETITION FOR DEGREES

If applying **within 6 months** of your 3°, the cost will be \$295.00, which includes \$115.00 for dues and \$180.00 for the initiation fee, educational materials from Supreme Council, Your hat & ring.

AFTER 6 months of your 3°, the cost will be \$435.00, which includes \$115.00 for dues and \$320.00 for the initiation fee educational materials from Supreme Council, Your hat & ring.

Make checks payable to:
Santa Barbara Lodge of Perfection

Remit to:
Santa Barbara Scottish Rite Bodies
16 E. Carrillo Street
Santa Barbara, CA 93101

I respectfully petition to receive degrees from the 4th to the 32nd, inclusive.

The following information is given upon my Masonic Honor:

Full name _____
Print or Type FIRST MIDDLE LAST

Address _____
STREET CITY ZIP

Blue Lodge Name/Number _____ at _____

Date Raised? _____ 3° Proficiency _____

Date of Birth _____ Place _____

Occupation _____

Business Address _____
STREET CITY ZIP

Telephones: Residence _____ Business _____

Cell No.: _____ E-mail: _____

I have resided in California for _____ years. Wife's name: _____

Have you ever petitioned for any Scottish Rite degrees? Yes No (Circle one)

The inculcation of patriotism, respect for law and order and undying loyalty to the principles of civil and religious liberty, and the forbearance of a state sponsored religion, principles embodied by the Founding Fathers of the United States of America.

Wholeheartedly believing in the foregoing, I respectfully apply for membership with the Santa Barbara Scottish Rite Bodies.

DATE _____

SIGNATURE _____

Recommenders:
(Two members of the Santa Barbara Bodies in good standing who must personally sign the petition.)

1) _____

2) _____

ADDRESS _____

ADDRESS _____

*By endorsing this petition, you are making a commitment to attend this candidate's degrees

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FOR OFFICE USE ONLY				
Date Paid	Amount Paid	Check #	1st Reading	2nd Reading

MEMBER'S PERSONAL BIOGRAPHY SHEET

The Scottish Rite office is in the process of compiling and up-dating the desired personal data of all members, so that the records may be complete. It is important that the following information be retained in each member's file for future reference. Please cooperate in this endeavor by completing the following form and mailing it to the Scottish Rite office.

If space is insufficient, please attach continuation sheets. Show additional data.

Name _____	Date of birth _____
Home _____	Place of birth _____
Address _____	Wife's name _____
_____	Home phone _____

Work _____	Work Phone _____
Address _____	

Education (Please show years and degrees earned)

Occupations (If retired, former occupation)

Service organizations, (community service, and public offices held)

Military service & Citations

Masonic career (offices held, year, number & name of lodge)

Hobbies

Preferences for participation in Scottish Rite activities

Santa Barbara



ANCIENT & ACCEPTED
Scottish Rite
OF FREEMASONRY

Ill. Maurice Sourmany, 33°
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Re: **Privacy Policy**

Dear Brother:

The Orient of California for the Ancient & Accepted Scottish Rite, Southern Jurisdiction of the United States has adopted a policy intended to enhance the protection of the privacy all active members of the Scottish Rite in California. As you know, the fraternal business of this Valley oftentimes involves the use of photographs of our members; publishing bulletins and articles that include members names and contact information; press releases including some or all of the same or similar information; ads, websites and social media that publishes the same or similar information; and, releases that tend to identify our members as Scottish Rite Freemasons. That information is referred to as *personally identifiable information* that identifies or traces your identity.

To address the desires of some of our active members, the Orient of California as drafted a form letter that if dated, signed and delivered by a member to his Valley will remove that member from having such *personally identifiable information* made known to the public. Please carefully review the enclosed form and if you wish to opt-out of being identified either by photograph or any other *personally identifying information*, date and sign the form and return it by the U.S. mail to this Valley.

If you do not wish to opt-out from the use of such information in the normal course of this Valley's fraternal business, you need not do anything. If we do not receive your written confirmation of your desire to opt-out within thirty (30) days of the date of this letter, we will assume that the Orient and Valleys may continue making such use of that information with your informed consent. In the event you wish to speak with someone in the Valley about this letter, please call 805-965-6100 during our normal business hours from 9:00 to 3:00 Monday through Thursday.

Sincerely and Fraternaly,

Personal Representative
Of The Sovereign Grand Inspector General
Of The Valley Of Santa Barbara
Orient of California

Santa Barbara



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OF FREEMASONRY

Ill. Maurice Sourmany, 33°
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REVISED Santa Barbara Valley Privacy Policy

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If you do not wish to opt-out from use of such information, you need not do anything. If the Valley does not receive your declaration form, we will assume that the Orient and Valleys may continue making such use of that information with your informed consent.

If you wish to speak with someone in the Valley about this notice, please call me, Maurice Sourmany, during our normal business hours from 9:00 AM to 3:30 PM, Monday through Thursday, (805)965-6100. I'm generally in the office on Tuesday and Thursday. You can of course call me at anytime on my cell, (805) 451-8320.

I am opting-out of publications (meaning my name, picture, etc. cannot be used):

Signed: _____ **Dated:** _____