



**APPLICATION FOR REINSTATEMENT IN SUBORDINATE CHAPTER**

\_\_\_\_\_ (Date)

To the Officers and Members of \_\_\_\_\_ Chapter No. \_\_\_\_\_ O.E.S., PHA.,  
I, \_\_\_\_\_ (Please Print), having the misfortune of being dropped, do  
hereby apply for reinstatement. As a former member who was initiated  
in \_\_\_\_\_ (Please Print) Chapter No. \_\_\_\_\_ on \_\_\_\_\_ (Date), desire  
to renew my membership into the Eastern Star Family. If accepted for reinstatement, I reaffirm my former  
pledge to subscribe to and abide by all the laws of the Chapter and those of Cecelia Dunlap Grand Chapter  
Order of the Eastern Star, P.H.A., of Kentucky.

**(Please print all information)**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Phone No. \_\_\_\_\_  
Name of Beneficiary: \_\_\_\_\_  
Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
**(Signature and Date of Applicant)**

On \_\_\_\_\_, the chapter approved the Application of Sis. \_\_\_\_\_ for Reinstatement  
(Date) (Name)

\_\_\_\_\_  
(Signature of Matron **and** Date)

\_\_\_\_\_  
(Signature of Secretary **and** Date)

\_\_\_\_\_  
(Signature of Patron **and** Date)

**By my signature, below, this is to verify that Bro. \_\_\_\_\_ is in  
good standing with Lodge # \_\_\_\_\_.**

\_\_\_\_\_  
**(Signature of Worshipful Master **and** Date)**

**(CHAPTER SEAL)**

**If a member is applying for reinstatement, he/she must be voted on, pay a reinstatement fee and any  
current dues and assessments. Send this form and the \$10.00 Reinstatement Fee to the Grand  
Secretary.**