

The National Organization of Emblem Clubs  
The Supreme Emblem Club of the United States of America ®



**Application for Membership**  
**Reinstatement, or Demit, or Dual Membership**

The following information is to be verified by Club Membership Chairman for accuracy before submitting to Club Financial Secretary

CLUB NAME LINCOLN EMBLEM NUMBER 433 DATE \_\_\_\_\_  
CLUB ADDRESS PO Box 733 Lincoln IL 62656  
P. O. Box City State 9 Digit Zip Code

The following to be completed by Applicant

Name of Applicant: \_\_\_\_\_ Month & Date of Birth: \_\_\_\_\_ / \_\_\_\_\_

Email address: \_\_\_\_\_ Name of Spouse: \_\_\_\_\_ Month & Date of Anniversary: \_\_\_\_\_ / \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ -

Tel: (Home) (\_\_\_\_) \_\_\_\_\_ Tel: (Work)(\_\_\_\_) \_\_\_\_\_ Occupation \_\_\_\_\_

Are you at least 16 years of age? \_\_\_\_\_ Are you an American Citizen? \_\_\_\_\_ Do you believe in God? \_\_\_\_\_

Have you been convicted of a felony? \_\_\_\_\_ If yes, please explain \_\_\_\_\_

Name of Emblem Club Sponsor \_\_\_\_\_ Emblem Sponsor Club Number \_\_\_\_\_

Signature of Emblem Club Sponsor \_\_\_\_\_

Name of Elk Relative/and or Sponsor \_\_\_\_\_ Elk Sponsor Lodge Number \_\_\_\_\_

Signature of Elk Relative/and or Elk Sponsor \_\_\_\_\_

Are you a former Emblem member? \_\_\_\_\_ If yes, Club Name: \_\_\_\_\_ Club Number: \_\_\_\_\_

Did you serve as a Past President? No \_\_\_\_\_ Yes \_\_\_\_\_ When \_\_\_\_\_ Club Name & Number \_\_\_\_\_

When and how was membership severed? \_\_\_\_\_

I enclose with this application, Annual Dues \$ \_\_\_\_\_ and the Initiation Fee of \$ \_\_\_\_\_

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

(FALSIFICATION OF ANY INFORMATION SHALL RESULT IN EXPULSION OF MEMBER)

Note: Membership is contingent upon a majority vote of the membership. If accepted, the applicant will be notified of the date, time, and place of Initiation. If not accepted for membership, all money will be refunded, and applicant will be notified with a courteous letter. Applicant not accepted for membership, may apply again in six (6) months. Only a new member is to be initiated.

THE FOLLOWING IS TO BE COMPLETED BY THE CLUB FINANCIAL SECRETARY AND RETAINED PERMANENTLY IN CLUB FILE

Note: If this form is used for purpose of a Demit, a Demit Form must still be issued to member, for presentation to the Club for acceptance. Member must reinstate in the Original Club before being given a Demit by Original Club. Please order Demit Form(s) from the Supreme Administrator, address inside front page of Topics.

The above applicant is applying for one of the following, and one is marked with an X:  
New Member \_\_\_\_\_ Reinstatement \_\_\_\_\_ Demit \_\_\_\_\_ Dual Membership \_\_\_\_\_  
Permanent Membership Number: \_\_\_\_\_

Date Voted on \_\_\_\_\_ Date Accepted \_\_\_\_\_ Date Initiated \_\_\_\_\_ Date Rejected \_\_\_\_\_

If this form is filled out for a Demit, indicate which Club the member is demitting from, and what Club member is demitting or reinstating to:  
Demit from Club Name: \_\_\_\_\_ Club No: \_\_\_\_\_

Demit/Reinstate to Club Name: \_\_\_\_\_ Club No: \_\_\_\_\_

Dual Membership: Original Club: \_\_\_\_\_ Dual Club: \_\_\_\_\_

Please send typed list of new members/addresses, dropped members, dual members address, and deceased members, as they occur, to Supreme Records Manager, PSP Donna Mazzola, 53 Monomoyic Way, Chatham, MA 02633  
pspdonnamazzola@gmail.com

F-1039 /2026