

**APPLICATION FOR MEMBERSHIP CERTIFICATES
GRAND CHAPTER OF SOUTH DAKOTA
(50, 60, 70, and 75-Year Membership)**

Chapter Name		Chapter Number:
Secretary Name		Date:
Address		Phone:
City/State		ZIP:
Email address		

To the Grand Secretary, Order of Eastern Star in South Dakota:

It is our belief that the following listed member is a member in Good Standing in this Chapter and has/completed or will have completed the required number of years of membership in the Order of the Eastern Star as listed below. This fact was announced to our membership at our last stated meeting and we respectfully request that a (please specify below)

(Check one): **Certificate Only** or **Certificate and Pin** be provided for presentation.

Member Name:	50 Years	60 Years	70 Years	75 Years
Initiated into	Chapter No		Initiation date:	
City/State:				

In the following spaces below please list the history of demits, affiliations, and chapter consolidations in the order they occurred.

Chapter No, City and State	Date Demitted	Date Affiliated	Date Consolidated

Attest:

Chapter Seal

Dated this _____ day of _____ 20_____.

_____ Worthy Matron

_____ Secretary