



**GENERAL GRAND CHAPTER
ORDER OF THE EASTERN STAR
ROB MORRIS MEMBERSHIP PROGRAM 2021-2024**

Rob Morris Membership Award Request Form

This is to certify that:

Name of Member _____
Address _____ City _____
State _____ ZIP _____
Date Submitted _____

Please check as appropriate

- Has completed the 300 points for the Rob Morris Membership Jewel
AND/OR
 Has completed the 300 points for the Triennium bar: *Circle one* **2018-2021 or 2021-2024**

ATTEST:

NAME OF CHAPTER SECRETARY _____

Name and Number of Chapter _____

Mailing Address: _____ **City:** _____

State: _____ **Zip:** _____

Phone Number: _____ **Email:** _____

(CHAPTER SEAL)

Chapter Secretary Signature: _____

Return Form to:

**Phyllis Lacki, Co-Chairman Membership
3888 Fern Valley Dr.
Memphis, TN 38125.**