## DUPLICATE MAJORITY, GRAND CROSS OF COLOR OR SERVICE TO RAINBOW CARDS AND/OR MEDALLIONS AND/OR RESEARCH

TO: **Supreme Assembly**

INTERNATIONAL ORDER OF THE RAINBOW FOR GIRLS

315 East Carl Albert Parkway

McAlester, OK 74501

E-mail: saoffice@gorainbow.org Business phone: 918-423-1328

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**\_\_\_\_\_\_ $25.00 - Majority**

**\_\_\_\_\_\_ $20.00 - Grand Cross Card or Service to Rainbow Card**

**\_\_\_\_\_\_ $20.00 - GCC Medallion or Service to Rainbow Medallion**

**\_\_\_\_\_\_ $25.00 - Research for years of Rainbow membership verification for Eastern Star**

**ALL ITEMS MUST BE PREPAID.**

Fill in all information necessary to process your request.

1. **MAJORITY CARD**:

Maiden name of member when initiated:

Assembly Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Number: \_\_\_\_\_\_\_\_, State:

Year initiated: \_\_\_\_\_\_\_\_\_\_\_.

Majority Received through: Age\_\_\_\_\_ Marriage\_\_\_\_ Year received:

Name on card:

If majority by age, do you want your married name included?

2. **GRAND CROSS OF COLOR CARD OR MEDALLION and** (please circle)

**SERVICE TO RAINBOW (SR) CARD OR MEDALLION** (please circle)

Assembly Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Number: \_\_\_\_\_\_\_ State:

Name on GCC/SR Card when first issued:

Approximate year GCC**/**SRreceived: \_\_\_\_\_\_\_\_\_\_\_\_\_ Girl or Adult:

Method of Payment: Check \_\_\_\_ Money Order \_\_\_\_ MasterCard/VISA/Discover: \_\_\_\_

Credit card number: \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_ EXP DATE:

CID: \_\_\_\_

Name/ Billing Address for Credit Card:

Daytime Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (must be included)

Name and Mailing Address: