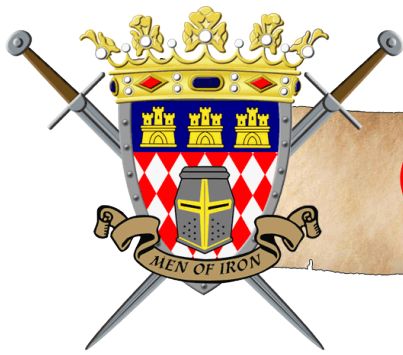




Men of Iron Advancement Application

The Squire



Please Print

Name: _____

Address: _____

City, State, Zip: _____

Phone #: _____ Date of Birth _____

Email: _____

Household/ Church Name: _____

Church Address _____

Church City, State, Zip _____

Church Phone# _____

Pastors Name _____

Advancement Application Checklist

- ☐ Must be a currently active member of Men of Iron
- ☐ Date and Location of Quest you assisted: _____
- ☐ Completed the Men of Iron Squires Workbook and advancement requirements
- ☐ Squires Workbook Serial Number-Required for Processing: # _____

Advancement Fee: \$25.00

The Page advancement fee covers the cost of the Squires advancement pin, Squires Certificate, Squire's Challenge Beads, shipping and handling.

Instructions

- Fill out both pages of this application in their entirety. Missing information will delay the processing. All signatures are required.
- Mail the paper application to the address listed on the second page or scan both pages and email to the address on the second page.
- Application Fee- Checks made out to Men of Iron and mailed to the physical address on page two with this application or pay online through the payment portal on the Men of Iron website Advancement page.

SPONSORS RECOMMENDATION/COMMENTS

I verify that I have worked with this applicant to earn the Men of Iron Squire's Advancement and that he has completed all of the requirements as outlined in the Men of Iron Page Advancement Workbook. I readily endorse this application and recommend approval of this advancement.

Sponsors Signature _____ **Date:** _____

Phone: _____ Email: _____

HEAD OF HOUSEHOLD APPROVAL

I verify that the applicant has successfully completed all of the requirements necessary to become a Squire as verified by his sponsor. He continues to be an asset to our household and is become a valuable part of Men of Iron.

Head of Household Signature _____ **Date:** _____

Phone: _____ Email: _____

PASTORS ENDORSEMENT

Pastors Signature _____ **Date:** _____

Phone: _____ Email: _____

APPLICANT SIGNATURE

I have worked with my sponsor to complete each part of the Squire's Workbook and have completed each task as set before me by my sponsor to complete all of the requirements to earn the Squire's advancement.

Applicant's Signature: _____ **Date:** _____

Send applications to:

Men of Iron- Advancement
504 Northview Drive, Van Buren, Arkansas 72956
Or

Scan and Email to: Men of Iron- Advancement (Subject Line)
Scan both completed pages and save as a PDF Document
Email to Menofironknights@gmail.com

For Official Use Only				
Date App Received	Workbook Serial #	Date Fee Received	Date Processed	Date Shipped