

*Military Order of Devil Dog Fleas
Application for Initiation*

Name in Full _____

Address _____ *City, State, Zip+4* _____

Email address _____ *Phone* _____

I am a member in good standing of the _____ *Hide*

Affiliated with the _____ *Unit* *Department of* _____

I am a *nit crawler* *and want to be become a flea at the* _____ *Annual Flea Scratch*
(circle one)

Date of Application _____ *Signature* _____

Accepted by _____ *Date* _____

(Scratchy Flea)

email address _____

Date of Initiations: _____

Initiating Officer _____ *email address* _____

***Copy for Department Scratchy Flea
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