

HOUSE OF DELEPITORE

MEMBERSHIP APPLICATION

www.daemonolatry.com templememberdirector@gmail.com

Personal Information

Full Legal Name: _____

Nickname or name you would like to use in the Temple: _____

Date of Birth: _____

Address: _____

Email: _____

Website/Blog: _____

Have you been convicted of felonies or serious misdemeanors? Yes No

If so, explain. (Having a criminal record does not preclude membership. However, concealing a criminal record will result in immediate cancellation of your membership.)

Have you ever received treatment for a psychiatric disorder? Yes No

Are you currently under the care of a psychiatrist or counselor? Yes No

Do you currently take any psychoactive drugs (prescription or not)? Yes No

If so, explain (Again, having this kind of history does not necessarily preclude membership. If you are admitted and found to have concealed such a history, you will be expelled.)

Sponsorship

If you are sponsored by clergy from the House of Delepitore or an active member, complete this part.

Sponsor: _____

Other Temple contacts: _____

The House of Delepitore

Would you be interested in Baptism and/or Initiation into the House of Delepitore?

Yes No

What do you feel that the House of Delepitore can offer you?

Do you have any particular interests you are hoping that the House of Delepitore can assist you with? (i.e. Gate opening, scrying, divination, etc.)

Do you feel you would benefit from pre-initiate training?

Personal Beliefs

Are you able to practice your Religion relatively in the open?

Yes

No

If you have come from a different set of beliefs, briefly describe them and say a little bit about why you left those beliefs.

What are your views on the Demonic Divine?

Do you have sex with Demons?

What are your views on binding Demons to objects?

I believe it is OK as long as you do it yourself.

I do not believe in or practice binding the Demonic to items.

I believe it is OK as long as it is respectful.

I believe it is OK as long as it is/was performed by a practicing Daemonolator or clergy.

Are you interested in Magick as well as the Spirituality of the Occult?

Yes

No

Affiliations

Please list any magical or initiatory organizations you have been affiliated with and years associated. If you were previously associated with the House of Delepitore, include that here and the reason you left.

Background

Please give us a brief overview of your experience.

I am applying for affiliation with the House of Delepitore. I understand that membership in the House of Delepitore requires a commitment of time and effort on my part, for study, correspondence and practice. I affirm that the information I have provided is accurate and complete. Once completed, please electronically sign and email to templememberdirector@gmail.com. We will review the application and get back to you ASAP. Thank you for your interest in the House of Delepitore.

Signature