Introduction ............................................................................................................................... 2
The Evolution of the “World’s Greatest Fraternity” ............................................................... 3
The Evolution of the “World’s Greatest Philanthropy” .......................................................... 7
Entering the Burn Care Field .................................................................................................. 12
Continuing the Commitment ................................................................................................. 15
The Fraternity Flourishes ....................................................................................................... 18
Shriners of North America — How the Organization Works ................................................. 21
Shriners Hospitals for Children Directory ........................................................................... 24
Admission Information ........................................................................................................... 25
Board of Trustees Chairmen ................................................................................................. 26
Heads of Government ........................................................................................................... 27
Ways of Giving ....................................................................................................................... 28
Donor Recognition Program ................................................................................................. 29
What is a Shriner? What kind of organization attracts physicians, lawyers, truck drivers, dentists, contractors, heads of state, movie stars, generals, clergymen and accountants?

Someone might answer: “Shriners are those guys who have those parades with the wild costumes and funny little cars.” Another might think of circuses and clowns. The fellow next to him might interject, “No, Shriners are the guys who wear those funny hats — like flowerpots — and have those big conventions.”

“I don’t know about that,” a passerby might add. “But I do know my little girl was born with clubfeet and now they are straight, and she can walk, thanks to Shriners Hospitals for Children.”

“She can walk?” questions still another. “I thought the Shriners ran those fantastic burn hospitals. I’ve read stories about them saving kids with burns on 90 percent of their bodies.”

All those people are right. Each has experienced an aspect of Shrinedom. What they cannot experience, unless they are Shriners, is the camaraderie, deep friendships, good fellowship and great times shared by all Shriners. What they may not know is that all Shriners share a Masonic heritage: Each is a Master Mason in the Freemasonry Fraternity.

Historically, Masons had to become members of the York or Scottish Rite Bodies before becoming a Shriner. However, at the Imperial Council Session in July 2000, an amendment to Shrine law changed that requirement, allowing Master Masons to become Shriners directly.

There are approximately 400,000 Shriners now. They gather in temples, or chapters, throughout the United States, Canada, Mexico and the Republic of Panama. There are 22 Shriners Hospitals for Children providing care for orthopaedic conditions, burns, spinal cord injuries, and cleft lip and palate. These hospitals have helped approximately 835,000 children — at no cost to parent or child — since the first Shriners Hospital opened in 1922. How did it all start? How does it work?
The Evolution of the  
“World’s Greatest Fraternity”

In 1870, several thousand of the 900,000 residents of Manhattan were Masons. Many of these Masons made it a point to lunch at the Knickerbocker Cottage, a restaurant located at 426 Sixth Avenue. At a special table on the second floor, a particularly jovial group of these men used to meet regularly.

The Masons who gathered at this table were noted for their good humor and wit. They often discussed the idea of a new fraternity for Masons, in which fun and fellowship would be stressed more than ritual. Two of the table regulars, Walter M. Fleming, M.D., and William J. “Billy” Florence, an actor, took the idea seriously enough to do something about it.

Billy Florence was a star. After becoming the toast of the New York stage, he toured London, Europe and Middle Eastern countries, always playing to capacity audiences. While on tour in Marseilles, France, Florence was invited to a party given by an Arabian diplomat.

Florence, recalling conversations at the Knickerbocker Cottage, realized that this Arabian theme might well be the vehicle for the new fraternity.

Dr. Walter Fleming was a prominent physician and surgeon. Born in 1838, he obtained a degree in medicine in Albany, N.Y., in 1862. During the Civil War, he was a surgeon with the 13th New York Infantry Brigade of the National Guard. He then practiced medicine in Rochester, N.Y., until 1868, when he moved to New York City and quickly became a leading practitioner.

Fleming was devoted to fraternalism. He became a Master Mason and completed some of his Scottish Rite work in Rochester. Fleming then completed his Scottish Rite
degrees in New York City and was coroneted a 33° Scottish Rite Mason on September 19, 1872.

Fleming took the ideas supplied by Florence and converted them into what would become the Ancient Arabic Order of the Nobles of the Mystic Shrine (A.A.O.N.M.S.).

With the help of other Knickerbocker Cottage regulars, Fleming drafted the ritual, designed the emblem and costumes, formulated a salutation, and declared that members would wear a red fez.

The initiation rites, or ceremonials, were drafted by Fleming with the help of three Brother Masons: Charles T. McClenachan, lawyer and expert on Masonic Ritual; William Sleigh Paterson, printer, linguist and ritualist; and Albert L. Rawson, prominent scholar and Mason who provided much of the Arabic background.

**The Emblem**

The Crescent was adopted as the Jewel of the Order. Though any materials can be used in forming the Crescent, the most valuable are the claws of a Royal Bengal Tiger, united at their base in a gold setting. In the center is the head of a sphinx, and on the back are a pyramid, an urn and a star. The Jewel bears the motto “Robur et Furor,” which means “Strength and Fury.” Today, the emblem includes a scimitar from which the crescent hangs, and a five-pointed star beneath the head of the sphinx.
The Salutation

Dr. Fleming and his colleagues also formulated a salutation used today by Shriners — “Es Selamu Aleikum!” — which means, “Peace be with you!” In returning the salutation, the gracious wish is “Aleikum Es Selamu,” which means “With you be peace.”
The Fez

The red fez with a black tassel, Shriners’ official headgear, has been handed down through the ages. It derives its name from the place where it was first manufactured — the city of Fez, Morocco.

Some historians claim it dates back to about A.D. 980, but the name of the fez, or tarboosh, does not appear in Arabic literature until around the 14th century. One of the earliest references to the headgear is in “Arabian Nights.”

The First Meeting

On September 26, 1872, the first temple in the United States was organized in the New York City Masonic Hall. Charles T. McClenachan and Dr. Fleming had completed the ritual and proposed that the first temple be named Mecca. The original 13 Masons of the Knickerbocker Cottage lunch group were named Charter Members of Mecca Temple (now Mecca Shriners). Noble Florence read a letter outlining the “history” of the Order and giving advice on conducting meetings. The officers elected were Walter M. Fleming, Potentate; Charles T. McClenachan, Chief Rabban; John A. Moore, Assistant Rabban; Edward Eddy, High Priest and Prophet; George W. Millar, Oriental Guide; James S. Chappel, Treasurer; William S. Paterson, Recorder; and Oswald M. d’Aubigne, Captain of the Guard.

The organization was not an instant success, even though a second temple was chartered in Rochester in 1875. Four years after Shriners’ beginnings, there were only 43 Shriners, all but six of whom were from New York.

The Imperial Council

At a meeting of Mecca Shriners on June 6, 1876, a new body was created to help spur the growth of the young fraternity. This governing body was called “The Imperial Grand Council of the Ancient Arabic Order of the Nobles of the Mystic Shrine for the United States of America.” Fleming became the first Imperial Grand Potentate, and the new body established rules for membership and the formation of new temples. The initiation ritual was embellished, as was the mythology about the fraternity. An extensive publicity and recruiting campaign was initiated.

It worked. Just two years later, in 1878, there were 425 Shriners in 13 temples. Five of these temples were in New York, two were in Ohio and the others were in Vermont, Pennsylvania, Connecticut, Iowa, Michigan and Massachusetts.

The number of Shriners continued to grow in the 1880s. By the time of the 1888 annual session (convention) in Toronto, there were 7,210 members in 48 temples throughout the United States and one in Canada.

While the organization was still primarily social, instances of philanthropic work became more frequent. During an 1888 yellow fever epidemic in Jacksonville, Fla., members of Morocco Shriners and Masonic Knights Templar worked long hours to relieve suffering. In 1889, Shriners came to the aid of the Johnstown Flood victims. In 1898, there were 50,000 Shriners, and 71 of the 79 temples were engaged in some sort of philanthropic work.

At its 1900 Imperial Session, representatives from 82 temples marched in a Washington, D.C., parade reviewed by President William McKinley. Membership was well over 55,000.
Evolution of the
“World’s Greatest Philanthropy”

Shriners were unstoppable in the early 1900s. Membership grew rapidly, and the geographical range of temples widened. Between 1900 and 1918, eight new temples were created in Canada, and one each in Honolulu, Mexico City and the Republic of Panama. The organization became, in fact, the Ancient Arabic Order of the Nobles of the Mystic Shrine for North America. New flourishes were added to a growing tradition of colorful pageantry. More bands were formed, and the first circus is said to have opened in 1906 in Detroit.

During the same period, there was growing member support for establishing an official charity. Most temples had individual philanthropies, and sometimes Shriners as an organization gave aid. After the 1906 earthquake in San Francisco, Shriners sent $25,000 to help the stricken city, and in 1915, Shriners contributed $10,000 for the relief of European war victims. But neither the individual projects nor the special one-time contributions satisfied the membership, who wanted to do more.

In 1919, Freeland Kendrick (Lu Lu Shriners, Philadelphia) was the Imperial Potentate-elect for the 363,744 Shriners. He had long been searching for a cause for the thriving group to support. In a visit to the Scottish Rite Hospital for Crippled Children in Atlanta, he became aware of the overwhelming orthopaedic needs of children in North America. As Imperial Potentate in 1919 and 1920, he traveled more than 150,000 miles, visiting a majority of the 146 temples to campaign for an official philanthropy.

1920 Imperial Session

At the June 1920 Imperial Session in Portland, Ore., Kendrick proposed establishing Shriners Hospital for Crippled Children (now Shriners Hospitals for Children), to be supported by a $2 yearly assessment from each Shriner (now $5 per year).

Conservative Shriners expressed doubts about assuming this kind of responsibility. Prospects for approval were dimming when Noble Forrest Adair (Yaarab Shriners, Atlanta) rose to speak:

“I was lying in bed yesterday morning, about 4 o’clock . . . and some poor fellow who had strayed from the rest of the band . . . stood down there under the window for 25 minutes playing ‘I’m Forever Blowing Bubbles.’”

He said that when he awoke later, “I thought of the wandering minstrel, and I wondered if there were not a deep significance in the tune that he was playing for Shriners, ‘I’m Forever Blowing Bubbles.’”

He noted, “While we have spent money for songs and spent money for bands, it’s time for the Shrine to spend money for humanity. I want to see this thing started. Let’s get rid of all the technical objections. And if there is a Shriner in North America,” he continued, “who objects to having paid the two dollars after he has seen the first crippled
child helped, I will give him a check back for it myself.”

When he was through, Noble Adair sat down to thunderous applause. The whole tone of the session had changed. There were other speakers, but the decision had already been reached. The resolution was passed unanimously.

A committee was chosen to determine the site and personnel for the Shriners Hospital. After months of work, research and debate, the committee concluded that there should be not just one hospital but a network of hospitals throughout North America. It was an idea that appealed to Shriners, who liked to do things in a big and colorful way. When the committee brought the proposal to the 1921 Imperial Session in Des Moines, Iowa, it too was passed.

First Hospital

Before the June 1922 Imperial Session, the cornerstone was in place for the first Shriners Hospital for Crippled Children in Shreveport, La. The rules were simple: To be admitted, a child must be from a family unable to pay for the orthopaedic treatment he or she would receive (this is no longer a requirement), be under 14 years of age (later increased to 18) and be, in the opinion of the chief of staff, someone whose condition could be helped.

The Shriners Hospitals network is supervised by members of the Board of Trustees, who are elected at the annual meeting of the hospital corporation. Each hospital operates under the supervision of a local Board of Governors, a chief of staff and an administrator. Members of the boards are Shriners, who serve without pay.

The network of orthopaedic hospitals grew as follows: Shreveport, Sept. 16, 1922; Honolulu, Jan. 2, 1923; Twin Cities, March 12, 1923; San Francisco, June 16, 1923 (relocated to Sacramento in 1997); Portland, Jan. 15, 1924; St. Louis, April 8, 1924; Spokane, Nov. 15, 1924; Salt Lake City, Jan. 22, 1925; Montreal, Feb. 18, 1925; Springfield, Feb. 21, 1925; Chicago, March 20, 1926; Philadelphia, June 24, 1926; Lexington, Nov. 1, 1926; Greenville, Sept. 1, 1927; Mexico City, March 10, 1945; Houston, Feb. 1, 1952; Los Angeles, Feb. 25, 1952; Winnipeg, March 16, 1952 (closed Aug. 12, 1977); Erie, April 1, 1967; Tampa, Oct. 16, 1985, and Sacramento, Calif., April 14, 1997.
The first patient to be admitted in 1922 was a little girl with a clubfoot, who had learned to walk on the top of her foot rather than the sole. The first child to be admitted at the Twin Cities hospital was a boy with polio. Since that time, approximately 835,000 children have been treated at the 22 Shriners Hospitals. Surgical techniques developed in Shriners Hospitals have become standard in the orthopaedic world. Thousands of children have been fitted with arm and leg braces and artificial limbs, most of them made at the hospitals by expert technicians.

**Orthopaedic Research**

From 1950 to 1960, Shriners’ funds for helping children increased rapidly. At the same time, waiting lists of new patients for admission to Shriners Hospitals began to decline, due to the polio vaccine and new antibiotics. Thus, Shriners found themselves able to provide additional services, and leaders began to look for other ways they could help children.

One result was collating medical records of patients of Shriners Hospitals. By placing the records of each patient and treatment on computer and microfilm, valuable information was made available to all Shriners surgeons and the medical world as a whole. This process, begun in 1959, also made it easier to initiate clinical research in Shriners orthopaedic hospitals.

Shriners Hospitals had always engaged in clinical research, and in the early ’60s, Shriners aggressively entered the structured research field and began earmarking funds for research projects. By 1967, Shriners were spending $20,000 on orthopaedic research. Today, the annual research budget totals approximately $37 million. Researchers are working on a wide variety of projects, including studies of bone and joint diseases, such as juvenile rheumatoid arthritis; increasing basic knowledge of the structure and function of connective tissue; and refining functional electrical stimulation, which is enabling some children with spinal cord injuries to have limited use of their arms and legs.
Entering the Burn Care Field

This expansion of orthopaedic work was not enough for Shriners. They had enough funds to further expand their philanthropy. The only question was: What unmet need could they fill?

A special committee established to explore areas of need found that burn treatment was a field of service that was being bypassed. In the early '60s, the only burn treatment center in the United States was part of a military complex. The committee was ready with a resolution for the 1962 Imperial Session in Toronto. The resolution, dated July 4, 1962, was adopted by unanimous vote.

On Nov. 1, 1963, Shriners opened a seven-bed wing in the John Sealy Hospital at the Univer-

The new Shriners Hospital in Boston, completed in 1999, replaced the original facility, which opened Nov. 2, 1968.
sity of Texas Medical Branch in Galveston as an interim center for the care of severely burned children. On Feb. 1, 1964, Shriners opened a seven-bed unit in the Cincinnati General Hospital on the campus of the University of Cincinnati. A third interim operation, a five-bed unit, was opened March 13, 1964, in the Massachusetts General Hospi-

The new Shriners Hospital in Cincinnati was completed in 1992. The original facility opened Feb. 19, 1968.

The new Shriners Hospital in Galveston was completed in 1992, replacing the original facility, which opened March 20, 1966.
tal (Boston) under the direction of Harvard Medical School.

While children were being treated in these units, separate buildings were constructed near each interim location. These buildings, three 30-bed pediatric burn hospitals, were designed to meet the special needs of burned children. At each, the staffs remain affiliated with their neighboring universities in order to better carry out Shriners Hospitals three-fold mission of treatment, research and teaching.

The hospital in Galveston opened March 20, 1966; the hospital in Cincinnati opened Feb. 19, 1968; and the Boston hospital opened Nov. 2, 1968. New facilities were constructed for all three burn hospitals in the 1990s. The new Cincinnati and Galveston hospitals were completed in 1992, and the new Boston hospital was completed in 1999.

A new burn treatment center opened in 1997, in the new Shriners Hospital in Sacramento, Calif. This Shriners Hospital provides orthopaedic, burn and spinal cord injury care, and serves as the primary pediatric burn treatment center in the western United States. The Sacramento hospital also conducts research in all three disciplines.

Since Shriners opened burn hospitals in the 1960s, a burned child’s chance of survival has more than doubled. They have saved the lives of children with burn injuries over 90 percent of their bodies. The techniques Shriners Hospitals have pioneered to prevent the disabling effects of severe burns have made a typical life possible for thousands of burn victims.

Most importantly, perhaps, Shriners’ establishment of hospitals that provide specialized care for burn injuries alerted the medical world to this special need, which has led to the establishment of other burn centers.

At Shriners Hospitals the work goes on, with medical staff continually searching for new ways to heal severe burns and reduce or, as much as possible, eliminate the disabling and scarring effects of those burns. Because of the special nature of the burn hospitals, they will surely always be on the frontier of burn care.
Continuing the Commitment

Spinal Cord Injury Rehabilitation

In 1980, Shriners Hospitals for Children opened a spinal cord injury (SCI) rehabilitation unit at the Philadelphia hospital. This was the first spinal cord injury unit in the United States designed specifically for children and teenagers who sustain these injuries. By 1984, two additional spinal cord injury units were operating in the Shriners Hospitals in Chicago and San Francisco. In 1997, the San Francisco hospital, including the SCI unit, was relocated to Sacramento, Calif.

At the SCI units, children receive long-term rehabilitative care and physical and occupational therapies to help them relearn the basic skills of everyday life. Counseling sessions help patients learn to cope with the emotional aspects of their injury and help them lead fulfilling lives by emphasizing the abilities they still have. Patients may enter an SCI unit apprehensive about the future, but after months of encouragement and support, they often leave with a sense of hope and optimism.

An ongoing study at the Philadelphia hospital is giving children with cerebral palsy and spinal cord injuries a sense of hope, as well. Researchers have found that using functional electrical stimulation (FES) makes walking an achievable goal for some children.

Cleft Lip and Palate

In 2005, the Joint Boards of Directors of Shriners Hospitals for Children and Shriners of North America added treatment of cleft lip and palate to the hospital network’s treatment disciplines. About 5,000 children are born each year with deformities of the upper lip and mouth, and comprehensive care for these conditions is often difficult to obtain. The nationally recognized program already in place at the Chicago Shriners Hospital serves as the expansion model.
Shriners Hospitals offers the same state-of-the-art, complete, high-quality care in this effort as it does in its established programs for orthopaedic conditions, severe burns and spinal cord injury rehabilitation.

**Rebuilding and Renovation Program**

Another important undertaking that began during the 1980s was an aggressive rebuilding and renovation program, involving the construction of new facilities and extensive renovations. In 1981, representatives at the 107th Imperial Council Session approved a major expansion and reconstruction program, which included the construction of a new orthopaedic hospital in Tampa, Fla. The opening of the Tampa hospital in 1985 — the first new hospital added to the system since the 1960s — brought the Shriners Hospitals system back to 22 hospitals. Since 1981, 21 Shriners Hospitals have either been rebuilt or totally renovated. In 1998, the Joint Boards of Directors and Trustees decided to build a new facility for the Mexico City hospital, which underwent extensive renovations in 1989. The new facility opened in May 2006.

In 1989, another significant decision was made when the Shriners voted to construct a new hospital in the Northern California region to replace the existing San Francisco hospital. In 1990, Sacramento was chosen as the site for the new hospital. Construction began in 1993, and in 1997, the new Northern California hospital in Sacramento opened its doors.

Also during the 1980s, because of the high number of patients with myelodysplasia (spina bifida), many of the Shriners Hospitals developed special programs to provide comprehensive, multidisciplinary care to these patients.

Previously, Shriners Hospitals had provided the orthopaedic care these children needed, but in 1986, the Joint Boards of Directors and Trustees approved a policy permitting the hospitals to address the multiple needs of these children by providing their medical, neurosurgical and urological requirements, as well as their psychosocial, nutritional and recreational care.

During the 1980s, the Shriners Hospitals in Los Angeles and Springfield, Mass., added regional prosthetic research programs. Both programs conduct research into ways to improve or create new prosthetics and help rehabilitate children with limb-deficiencies. These two programs, in addition to various other research programs throughout the 22
hospitals, ensure that Shriners Hospitals for Children remains a leader in the field of children’s orthotics and prosthetics.

The hospitals that specialize in burns also took steps to ensure that burn patients continue to receive the most advanced treatment available. The Cincinnati hospital initiated a burns air ambulance, the first air ambulance in the country devoted exclusively to transporting burn victims. The burn hospitals also developed a re-entry program to assist burn patients in their return home after being discharged from the hospital. During 1992, new replacement facilities for the Cincinnati and Galveston hospitals were dedicated, and groundbreaking ceremonies were held for a new facility for the Boston hospital. All the burn hospitals are continuing to conduct research to improve care for patients with burn injuries.

**Shriners Hospitals for Children**

In 1996, representatives took another significant step when they voted to officially change the name of their philanthropy to Shriners Hospitals for Children, permanently eliminating the word “crippled” from the organization’s corporate name. Representatives made the change in an effort to have the name better reflect the mission of Shriners Hospitals and the expansion of services over the years, including the opening of the burn hospitals and the addition of programs of comprehensive care for children with myelodysplasia and cleft lip and palate. The new name is intended to reflect the philosophy of Shriners Hospitals, which provide medical care for children at no charge, based only on what’s best for the child. The new name also does not label children in any way, but simply recognizes them for what they are: children.

**Research**

One way Shriners Hospitals for Children improves lives is through outcomes research. This type of research looks for opportunities to improve hospital practices, both clinical and operational, to help bring better care and quality of life to patients. The outcomes studies utilize more than one Shriners Hospital, and the projects, studies and performance improvement initiatives directly impact changes in operations and patient care practices at all 22 Shriners Hospitals.

To ensure Shriners Hospitals for Children is constantly on the cutting edge of research, staff enlists the help of advisory boards, which are made up of eminent surgeons, clinicians and scientists who review grants and offer expertise on project funding. The Medical Advisory Board, Research Advisory Board and Clinical Outcomes Studies Advisory Board also provide review, guidance and subjective assessment to many areas of Shriners Hospitals.
The Fraternity Flourishes

As the hospital network grew, the fraternity continued in its grand tradition. In 1923, there was a Shriner in the White House, and Noble/President William G. Harding viewed the Shriners parade at the 1923 Imperial Session in Washington, D.C.

The East-West Shrine Game

The East-West Shrine Game was established in 1925 in San Francisco with the motto “Strong Legs Run So Weak Legs May Walk.” Throughout its history, this college all-star game has raised millions of dollars for Shriners Hospitals and helped millions of people become more familiar with the organization’s story. Before the game, players visit patients at a Shriners Hospital, so they can experience the real purpose of the game.

The Peace Memorial

In 1930, the Imperial Session was held in Toronto. For his Session, Imperial Potentate Leo V. Youngworth wanted something special. With appropriate approval, the leader of 600,000 Shriners commissioned a peace monument to be built in Toronto. It was to face south, commemorating 150 years of friendship between the United States and Canada.

The Peace Memorial was relocated and rededicated during the 1962 Imperial Session, and it stands today outside the National Exposition grounds in Toronto. When the Shriners returned to Toronto in 1989 for the 115th Imperial Council Session, the memorial was again rededicated, representing a renewed commitment to international brotherhood and fraternalism. The plaque reads: “Erected and dedicated to the cause of universal peace by the Ancient Arabic Order of the Nobles of the Mystic Shrine for North America June 12, 1930.”

The 1930 Session was Shriners’ own antidote to the pervasive gloom of the Great Depression. But it was only temporary. For the first time in its history, the fraternity began to lose members — the nobles just could not pay their dues.

The struggle to keep the hospitals and the fraternity going during these years was enormous. It was necessary to dip into the Endowment Fund capital to cover operating costs of the hospitals. To ensure the financial distinction between the hospitals and the fraternity, a corporation for each was established in 1937.

Shriners and the hospitals survived the Depression. In the 1940s, like the rest of North America, Shriners adjusted to wartime existence. Imperial Sessions were limited to business and were attended only by official representatives. Parade units stayed home and marched in local patriotic parades. During the four years of war, more than $1 billion was invested in government war bonds by and through Shriners. The hospital corpo-
tion also invested all of its available funds in government securities. After World War II, the economy improved, and men found renewed interest in fraternalism. By 1942, membership was once again increasing.

**Shriners International Exhibit**

The newly renovated Shriners International Exhibit is located at the George Washington Masonic National Memorial in Alexandria, Va. The exhibit went from being three rooms filled with Shriners’ memorabilia, to a visual Shriners and Shriners Hospitals adventure, complete with a life-size replica of the “Editorial Without Words,” a wall of fezzes encased in glass, and a room devoted entirely to Shriners Hospitals for Children.

The original exhibit was the dream of Past Imperial Potentate Alfred G. Arvold, who initiated the design of the rooms in 1945. The exhibit shares space in the memorial with the Scottish Rite, the York Rite and various other Masonic organizations.

**Shriners International Headquarters**

Until 1928, national offices were in Richmond, Va. With the growth of the fraternity, there were increasing pressures to locate headquarters in a city that would be more convenient to all temples. Thus, in 1958, the building at 323 N. Michigan Avenue, Chicago, was purchased. Twenty years later, at a special Session held April 10, 1978, in Tampa, Fla., representatives voted to relocate headquarters from Chicago to 2900 Rocky Point Drive, Tampa. The Tampa headquarters houses the administrative personnel for both the Iowa (Shriners of North America) and Colorado (Shriners Hospitals for Children) corporations, fraternal and hospital records, the attorneys who monitor the many estates involved in Shriners Hospitals for Children, and various other departments that support day-to-day operations of the fraternity and the philanthropy.

An expansion project began in 1987 to meet ever-increasing needs of the fraternity and Shriners Hospitals. A third wing, or pod, was added to the rear of the existing build-
ing, and the boardroom and executive offices for the fraternity and hospital system were relocated to the new area, allowing several departments to expand their offices in the original sections. The new, enlarged boardroom provides space for meetings of the Joint Boards and their committees, and for conferences.

In 1993, the Commemorative Plaza was built, with its larger-than-life-sized statue of a Shriner carrying a child. The statue represents what has become known as the “Editorial Without Words.”

The polished marble plaza features a semi-circular wall engraved with the names of every Imperial Potentate (chief executive officer of Shriners of North America) and his year served. In addition, below the statue is a cylindrical base engraved with names of the 22 Shriners Hospitals, surrounded by a fountain. Around the fountain are large inlaid marble squares bearing the names of each of the 191 temples, each temple’s city and state, year of incorporation and Shriners’ insignia (the scimitar). To the rear of the Commemorative Plaza and in front of the headquarters building are four flag poles with flags of the United States, Canada, Mexico and Panama, representing the countries with membership.

In early 1999, a major construction and renovation effort began that would add 35,000 square feet to the existing facility, bringing the total office area to about 120,000 square feet. This effort was initiated to accommodate the health care initiatives and trends taking place in the industry in the late 1990s. The exterior work came to an end in December 2001, with the installation of a three-dimensional 11-by-9-foot scimitar on the front of the building. The new windows on the building have a bluish-green tint, giving the building a different appearance than the gold-tinted windows, which had served as a landmark to identify the headquarters for two decades. On Feb. 24, 2002, the newly renovated Shriners International Headquarters was rededicated.
Shriners of North America —
How the Organization Works

Temples are located throughout the United States, Canada, Mexico and the Republic of Panama, with clubs around the world. There is, therefore, a special Shriners Pledge of Allegiance: “I pledge allegiance to my flag, and to the country for which it stands, one nation under God, indivisible, with liberty and justice for all.” Wherever Shriners gather, the national flags of the United States, Canada, Mexico and the Republic of Panama are flown.

Today, there are approximately 400,000 Shriners who belong to 191 temples, or chapters, from Al Aska Shriners in Anchorage, Ala., to Abou Saad Shriners in Panama, and from Aloha Shriners in Honolulu to Philae Shriners in Halifax, Nova Scotia.

The temples, their units and affiliated clubs embody the true spirit of fraternalism. Wherever a Shriner goes, he can be certain there are nobles who will extend their hand in greeting.

To better understand how all this works, an observer can start at a local temple. All temples are run by an elected Divan (officers), headed by the Potentate and the Chief Rabban. A Recorder, or record keeper/administrator, usually maintains an office at the temple. One member is elected or appointed to the “lowest rung” each January and under traditional practice moves up one “rung” each year. Thus, by the time he becomes Potentate of his temple, a Shriner usually has at least four years of experience in temple leadership.

Stated meetings of the temple membership as a whole must be held at least four times a year. In addition, each temple holds one or more ceremonials every year for the induction of new members. There are also many temple, unit and club social events each year.

Units are smaller groups organized within a temple for a specific purpose. Many of these are the uniformed units so familiar to parade watchers: Oriental Bands, Shriners Bands, Horse and Motor Patrols, Highlanders, Clowns, Drum Corps, Chanters and
Legions of Honor. Other temple units can include hospital hosts or tour guides, and transportation units, which work closely with their local Shriners Hospital — either with children at the hospital or transporting patients to and from the hospital.

Each temple has a clearly defined territory from which it can obtain new members. Since these jurisdictions are often quite large, smaller geographical units may be organized for fellowship purposes. These are the clubs, under the control of their mother temple.

In addition, any number of temples may form an association for social conventions, if the Imperial Council issues an appropriate charter. There are currently 20 regional associations and 19 unit associations.

The 191 temples are governed by the Imperial Council, which is composed of representatives. Representatives of the Imperial Council include all past and present Imperial Officers, emeritus representatives (who have served 15 years or more) and representatives elected from each temple. A temple may have two representatives if its membership exceeds 300, three if more than 600, and four if more than 1,000. These representatives meet once a year — usually in July at the Imperial Council Session — to make policy decisions and legislation regarding both the fraternity and the hospitals. With nearly 900 representatives, the Imperial Council constitutes one of the largest legislative bodies in the world. The representatives also elect the Imperial Officers. The president of the Colorado Corporation and members of the Board of Trustees for Shriners Hospitals for Children are elected by members of the Colorado Corporation.

The Imperial Divan, Shriners’ international governing body, consists of 13 officers plus an Imperial Chaplain. The Imperial Treasurer and the Imperial Recorder may be elected for several consecutive years. They are the only officers who receive compensation. As with temple Divans, an officer (with the exception of treasurer and recorder) is elected to the bottom of the Divan and, barring unforeseen circumstances, moves up one position each year. These officers, elected from among the representatives, are usually past temple Potentates. The Divan plus the immediate Past Imperial Potentate constitute the Board of Directors of the fraternal corporation and they, with the Chairman of the Board of Trustees, constitute the Board of Directors of the hospital corporation.

The chief executive officer of Shriners of North America is the Imperial Potentate, who is elected for one year. He visits many of the temples and hospitals and generally supervises both fraternal and hospital policies.
To help him with these tasks, the Imperial Potentate appoints committees to implement various programs. One of the most important of these committees is the donor relations committee, which coordinates and supervises contributions and bequests given to Shriners Hospitals for Children.

The day-to-day operations — keeping the records and accounts of the fraternity and hospitals, supervising the estates left to Shriners Hospitals and producing printed materials for the entire organization — are carried out at Shriners International Headquarters in Tampa. These offices are supervised by an executive vice president of the Imperial Council, an executive vice president of Shriners Hospitals, and a legal department, which is under the supervision of a managing attorney.

However complex the organization may seem, its essence is the fraternal fellowship for which it was originally founded. It has been said that there are no strangers in Shrinedom. This is evident in the great times and laughter wherever Shriners get together, whether in a local club meeting, a temple ceremonial, an association gathering or an Imperial Session. All Shriners share not just a Masonic background but a zest for living.

Though this quality remains consistent — from the original 13 members to the hundreds of thousands of Shriners today — the fraternity has adapted to many changes. Many more temple and convention activities include the families of Shriners. Today, many Shriners are deeply involved in Shriners Hospitals work in addition to their fraternal activities.

Most temples sponsor fundraising events to provide funds for Shriners Hospitals. In one calendar year, there may be nearly 500 of these events, which range from the East-West Shrine Game and other football games to horse shows, hospital newspaper sales, and miscellaneous sports and social events.

During the 1980s, Shriners Hospitals experienced the greatest expansion in their history, with major building programs, increasing numbers of patients receiving care, and expansion of services. Today, Shriners Hospitals have maintained their position at the forefront of specialized pediatric care for orthopaedics, burn injuries, spinal cord injuries, and cleft lip and palate. The Joint Boards plan to continue updating facilities, expanding research programs and increasing Shriners’ Hospitals ability to meet the medical needs of thousands of children.

Whatever changes occur within the fraternal organization or within the Shriners Hospitals system, Shriners of North America will remain the “World’s Greatest Fraternity,” operating and maintaining the “World’s Greatest Philanthropy.”

Es Selamu Aleikum.
Orthopaedic Care

- Canadian Hospital, 1529 Cedar Avenue, Montreal, Quebec, Canada H3G 1A6  (514) 842-4464
- *Chicago Hospital, 2211 N. Oak Park Ave., Chicago, IL 60707  (773) 622-5400
- Erie Hospital, 1645 West 8th Street, Erie, PA 16505  (814) 875-8700
- Greenville Hospital, 950 W. Faris Road, Greenville, SC 29605-4277  (864) 271-3444
- Honolulu Hospital, 1310 Punahou Street, Honolulu, HI 96826-1099  (808) 941-4466
- Houston Hospital, 6977 Main St., Houston, TX 77030-3701  (713) 797-1616
- Intermountain Hospital, Fairfax Road at Virginia Street, Salt Lake City, UT 84103  (801) 536-3500
- Lexington Hospital, 1900 Richmond Road, Lexington, KY 40502  (859) 266-2101
- Los Angeles Hospital, 3160 Geneva Street, Los Angeles, CA 90020  (213) 388-3151
- Mexico City Hospital, Av. del Imán No. 257, Col. Pedregal de Santa Ursula, Delegación Coyoacan, Mexico D.F. 04650, Mexico  011-525-55-424-7850
- *Philadelphia Hospital, 3551 N. Broad St., Philadelphia, PA 19152  (215) 430-4000
- Portland Hospital, 3101 S.W. Sam Jackson Park Rd., Portland, OR 97201-3095  (503) 241-5090
- St. Louis Hospital, 2001 S. Lindbergh Blvd., St. Louis, MO 63131-3597  (314) 432-3600
- Shreveport Hospital, 3100 Samford Ave., Shreveport, LA 71103  (318) 222-5704
- Spokane Hospital, 911 W. Fifth Ave., Spokane, WA 99204-2901  (509) 455-7844
- Springfield Hospital, 516 Carew Street, Springfield, MA 01104  (413) 787-2000
- Tampa Hospital, 12502 Pine Dr., Tampa, FL 33612-9499  (813) 972-2250
- Twin Cities Hospital, 2025 East River Road, Minneapolis, MN 55414  (612) 596-6100

Burn Care

- Boston Hospital, 51 Blossom Street, Boston, MA 02114  (617) 722-3000
- Cincinnati Hospital, 3229 Burnet Ave., Cincinnati, OH 45229-3095  (513) 872-6000
- Galveston Hospital, 815 Market Street, Galveston, TX 77550-2725  (409) 770-6600

Orthopaedic and Burn Care

- *Northern California Hospital, 2425 Stockton Blvd., Sacramento, CA  95817  (916) 453-2000

*Hospital includes spinal cord injury rehabilitation unit

Shriners International Headquarters

2900 Rocky Point Drive
Tampa, FL 33607-1460
(813) 281-0300
www.shrinershq.org
All children, up to age 18, may be eligible for treatment at a Shriners Hospital if there is a reasonable possibility they can benefit from specialized care available at Shriners Hospitals. Eligibility is not based on financial need or relationship to a Shriner.

There is never a charge to the patient or family for any medical care or services provided at a Shriners Hospital.

Application forms for admission can be obtained from any Shriners temple or club; by writing to Shriners Hospitals, P.O. Box 31356, Tampa, FL 33631; or by calling the Shriners Hospitals for Children toll-free referral line at (800) 237-5055. (In Canada, call (800) 361-7256). Applications are also available at www.shrinershq.org.

Applications must be completed by a parent or legal guardian and forwarded to a Shriners Hospital for approval. Upon acceptance, the child will be scheduled for admission or an outpatient clinic visit for evaluation.

Emergency Burn Care

The sooner a child with burn injuries reaches a Shriners Hospital that specializes in burn care, the better his or her chance of recovery. In an emergency, the referring physician should telephone the chief of staff at the nearest appropriate Shriners Hospital and indicate there is a patient needing emergency medical care. Transportation of the patient is the responsibility of the patient’s family, but many Shriners temples offer transportation assistance.

Non-emergency Burn Care

Non-emergency admission for burn care at a Shriners Hospital is dependent on medical needs of the patient and on availability of beds.

Application forms for non-emergency admissions for burn care can be obtained from any Shriners temple or Shriners club; by writing to Shriners Hospitals, P.O. Box 31356, Tampa, FL 33631; or by calling the Shriners Hospitals for Children patient referral line at (800) 237-5055. (In Canada, call (800) 361-7256). Applications are also available at www.shrinershq.org.

To obtain an application or for more information about Shriners Hospitals for Children:

In the U.S. (800) 237-5055
In Canada (800) 361-7256
www.shrinershq.org
Illustrious Noble Samuel Poyntz Cochran, 1902 Potentate of Hella Shriners, Dallas, served as the first Chairman of the Board of Trustees, from 1921 to 1934.

Imperial Sir W. Freeland Kendrick, second Chairman of the Board of Trustees, served from 1934 to 1949. Kendrick was Potentate of Lu Lu Shriners from 1906 to 1918, and from 1920 to 1923. He declined further service when he was elected Mayor of Philadelphia.

Imperial Sir Galloway Calhoun, Past Potentate of Karem Shriners, Waco, Texas, assumed direction of Shriners Hospitals after he had completed his year as Imperial Potentate in 1949. He served until his death in 1962.

Illustrious Noble Walter G. Seeger, Past Potentate of Osman Shriners, St. Paul, Minn., was elected Chairman in 1962. He had been a member of the Board since 1945 and was respected for his many years of tireless work.

Past Imperial Potentate Harold Lloyd became Chairman in 1963. He gave of his time and talents, as well as his fame as one of the movie all-time greats in the “World of Movie Comedy,” to enhance the work of Shriners Hospitals.

Past Imperial Potentate Harvey A. Beffa Sr. became Chairman in 1971. The business and civic leader had previously served as Vice Chairman of the Board. In 1962, while serving as Chairman of the Burns Committee, he brought a dramatic presentation before the Imperial Council that received unanimous approval to establish the Shriners burn hospitals. Having had polio, he knew firsthand the need for continuing the work of Shriners Hospitals.

Upon the death of Imperial Sir Harvey A. Beffa in 1976, Imperial Sir Peter Val Preda was appointed Chairman. Preda, a Past Potentate of Cairo Shriners, served until July of that year, when the representatives elected a new Chairman.

Past Imperial Potentate C. Victor Thornton served as Chairman of the Board of Trustees from 1976 through 1981. Thornton briefly held the position in 1971 also, assuming leadership upon the death of Past Imperial Potentate Harold Lloyd.

Past Imperial Potentate Woodrow W. Bennett served as Chairman of the Board of Trustees for three years. The Kansas City businessman was elected in July 1981, after serving for two years as the Board’s Vice Chairman.


Past Imperial Potentate Everett M. Evans served as Chairman for the 1996–97 year. Evans, 1992–93 Imperial Potentate, attended East Texas State University and is a branch manager of Bright Truck Leasing. He is Past Potentate of Sharon Shriners, Tyler, Texas.

Past Imperial Potentate John D. VerMaas served as Chairman from 1997 to 2003. VerMaas, 1996–97 Imperial Potentate, is the owner of VerMaas Construction, which builds, owns and leases office facilities to the U.S. Postal Service. VerMaas is Past Potentate of Sesostris Shriners, Lincoln, Neb.

Past Imperial Potentate Ralph W. Semb was elected Chairman in 2003. Semb served as the 1999–2000 Imperial Potentate. He is the owner of several New England businesses, including French King Entertainment Center, a premier bowling center; an apartment complex; a self-storage facility and a car wash. Semb is Past Potentate of Melha Shriners in Boston.

Heads of Government

Four Presidents of the United States and a Prime Minister of Canada

Four Presidents of Mexico and King Kalakaua of Hawaii
As a 501(c)(3) charitable organization, Shriners Hospitals for Children relies on the generosity of donors, past and present. Monetary gifts, as well as gifts of securities, real estate and personal property are welcome and help the organization carry out its three-fold mission of treatment, research and education.

Contributions
Contributions may be made at any time to Shriners Hospitals for Children and may be sent to the Office of Development in Tampa, Fla., or directly to any of our 22 hospitals.

Charitable Gift Annuities (CGAs)
In exchange for an irrevocable gift of cash, securities or other assets, Shriners Hospitals for Children agrees to pay one or two annuitants you name a fixed sum each year for life. You may qualify for a charitable deduction if you itemize your income taxes. CGAs are not available in all states.

Pooled Income Fund
For an initial contribution of $5,000 or more, donors can participate in the Shriners Hospitals for Children Pooled Income Fund. Under this agreement, donors or their designees will receive annual income from their contributions during their lifetime. A portion of the contribution may be deducted as a charitable donation.

Real Estate
All qualified real estate may be deeded outright to Shriners Hospitals for Children or, if it is a donor’s residence or farm, may be given subject to retained life interests. The value of the interest being contributed may be used as a charitable contribution for income tax purposes.

Securities
Contributions of securities are easily accomplished in most cases. If the securities have appreciated in value at the time of the gift, there can be income tax and other advantages for the donor.

Insurance
Shriners Hospitals for Children can be designated as the irrevocable beneficiary and owner of an insurance policy. Income, gift and estate tax charitable deductions may be allowed for a gift of an irrevocable life insurance policy under most state laws.

Wills
Designations of bequests should clearly indicate Shriners Hospitals for Children. Bequests under wills may reduce estate taxes. All bequests not restricted by the donor become part of the endowment fund, with only income from the fund being used to operate Shriners Hospitals.

Trust Agreements
Irrevocable charitable remainder unitrusts or annuity trusts may be established to provide for lifetime payments to the named beneficiaries. After the lifetime of the surviving income beneficiary, assets would be utilized by Shriners Hospitals for its charitable purposes.

1-800-241-GIFT (1-800-241-4438)  www.donate2shc.org
At Shriners Hospitals for Children, we highly value the generous donors that make our work possible. Because of this, we offer a number of recognition programs to salute our donors and their generosity.

**Gold Book Society**

The Gold Book Society recognizes the importance of our donors and the difference their gifts make in the lives of children through progressive donor awards. Nine levels of giving, from $2,000 to $249,999.99, are recognized by Gold Book Society awards given to living benefactors. Donors may progress through all awards as additional contributions are made. In addition to awards, living donors who contribute from $50,000-$249,999.99 will also be honored as “Because We Care” givers. A handsome plaque is displayed in a prominent location at each Shriners Hospital and at Shriners International Headquarters and features donors’ names engraved on individual brass nameplates.

**Philanthropic Society**

The Philanthropic Society honors major donors who give contributions and/or bequests in excess of $250,000. Gifts and bequests are recognized on a cumulative basis. A Philanthropic Society award center is prominently situated in each Shriners Hospital and at Shriners International Headquarters in Tampa. Additionally, donors or the families of deceased benefactors may receive a Philanthropic Society personal plaque for home or office.

**Naming Opportunities**

Shriners Hospitals also offers naming opportunities for donors who are interested in having their donations associated with a particular tangible asset, such as a room or piece of medical equipment, in lieu of the traditional recognition through our Gold Book Society or Donor Walls. These naming opportunities are available and feature handsome signage placed within the specified Shriners Hospital to commemorate the donor and honoree, and a wooden and metal book with an engraved graphic of the donor or honoree to recognize the donor’s generosity.

**Dream Makers Legacy Society**

The Dream Makers Legacy Society honors those who establish a legacy gift for Shriners Hospitals for Children through their wills.

These generous donors are recognized at two different levels. Upon receipt of a copy of a will or other document, donors who have established a gift under $250,000 receive a Shriners Hospitals Dream Makers Legacy Society certificate. Those who establish a legacy gift of $250,000 and above receive a handsome Shriners Hospitals Dream Makers Legacy Society book.
SHRINERS HOSPITALS FOR CHILDREN IS DULY REGISTERED WITH THE STATE OF FLORIDA (REGISTRATION NUMBER IS CH-433) AS REQUIRED BY THE SOLICITATION OF CONTRIBUTIONS ACT. A COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING (800) 435-7352, WITHIN THE STATE. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL OR RECOMMENDATION BY THE STATE.