The Grand Imperial Conclave for England and Wales and its Divisions and Conclaves Overseas of the Masonic and Military Order of the Red Cross of Constantine and the Holy Orders of the Holy Sepulchre and of St John the Evangelist

MEMBERSHIP APPLICATION FORM

To be completed by the Candidate for Installation, Joining or Re-joining.

Conclave Recorder: This Form is to be completed and sent within fourteen days of admission of the candidate to the Divisional Recorder (with cheque/BACS receipt)

Divisional Recorder: Please forward with cheque to The Finance Department, Mark Masons' Hall, 86 St. James's Street, London SW1A 1PL, or via email, only if paying by BACS, and accompanied with the BACS receipt to finance@mmh.org.uk

1. CONCLAVE NAME							
2. CONCLAVE NUMBER	3. DIVISION						
4. COMPANION							
5. FORENAMES IN FULL	(Initials) (Surname)						
6. DECORATIONS AND HONOURS	7. STYLE OR TITLE (e.g. Mr, Sir, Brigadier)						
8. ADDRESS (i)	(e.g. Mr, Str, Brigatier)						
(ii)							
(iii)							
(iv)							
(v)							
9. DATE OF BIRTH	(vi) POSTCODE						
10. TELEPHONE HOME	WORK						
MOBILE	FAX						
EMAIL DDOEFSSION (form or if retired)							
PROFESSION (former if retired) 11. RAISED IN CRAFT LODGE No.	ON CONSTITUTION						
12. EXALTED IN ROYAL	(if not English) ON CONSTITUTION						
ARCH CHAPTER	(if not English)						
JOINING / RE-JOINING MEMBERS 13.MMH MEMBERSHIP NUMBER (if known							
14. MOTHER RCC CONCLAVE No.	NAME						
CONSTITUTION (if not English)	REASON FOR LEAVING R esigned, H onorary						
DATE OF INSTALLATION	DATE OF LEAVING (if applicable) Member, Tyler, Ceased, Excluded, Warrant forfeited						
15. SOVEREIGN OF RCC CONCLAVE No.	DATE OF ENTHRONMENT AS SOVEREIGN						
16. PRESENT DIVISIONAL RANK	DATE						
17. PRESENT GRAND RANK	DATE						
PLEASE GIVE DETAILS OF ALL THE	RCC CONCLAVES OF WHICH YOU ARE OR HAVE BEEN A MEMBER OVERLEAF						
18. SIGNATURE OF CANDIDATE	I solomnly and sincerely declare that I profess the Christian Trinitarian faith						
19. SIGNATURE OF PROPOSER	20. SIGNATURE OF SECONDER						
21. THE CANDIDATE WAS INSTALLED/JOINED/RE-JOINED ON							
22. NAME OF RECORDER (Initials & Surnam	ereby certify that the above is a correct record e)						
23. SIGNATURE OF RECORDER	DATED						
24. CHEQUE BACS PAYMENT OF BACS REF. BACS REF. If paying by BACS you MUST enclose receipt of payment with this form							

CANDIDATES MEMBERSHIP DETAILS WITHIN THE ORDER

Please give the numbers of all the Conclaves of which you are or have been a member together with the year of admission and if applicable the date of Installation and/or the date of leaving.

If there is insufficient space please complete the details on a second form (page 2 only) and attach to the first form.

CONCLAVE No.	*	DATE ADMITTED	**	DATE OF LEAVING	DATE OF INSTALLATION	CONSTITUTION		
CONCLAVE No.	*	DATE ADMITTED	**	DATE OF LEAVING	DATE OF INSTALLATION	CONSTITUTION		
CONCLAVE No.	*	DATE ADMITTED	**	DATE OF LEAVING	DATE OF INSTALLATION	CONSTITUTION		
CONOLAVE N-	*	DATE ADMITTED		DATE OF LEAVING	DATE OF INSTALLATION	CONSTITUTION		
CONCLAVE No.	<u>*</u>		**	DATE OF LEAVING	DATE OF INSTALLATION	CONSTITUTION		
CONCLAVE No.	*	DATE ADMITTED	**	DATE OF LEAVING	DATE OF INSTALLATION	CONSTITUTION		
* Admitted, Joined or Founder **REASON FOR LEAVING: - Resigned, Honorary Member, Tyler, Ceased,								
		,	E xclu	ded, W arrant forfeited				
ADDITIONA	L COMI	MENTS						