**MEM** 

The Great Priory of the United Religious, Military and
Masonic Orders of the Temple and of St. John of Jerusalem, Palestine, Rhodes and Malta
of England and Wales and its Provinces Overseas

## **MEMBERSHIP APPLICATION FORM**

To be Completed by the Candidate for Installation, Joining or Re-Joining

This form must be completed using typescript or block letters and sent within fourteen days of admission of the candidate via the Provincial Vice Chancellor to:

The Great Vice Chancellor, The Chancery of the Orders, Mark Masons' Hall, 86 St. James's Street, London, SW1A 1PL

1. PRECEPTORY NAME									
2. NUMBER	3. PROVINCE								
4. COMPANION									
A	(Initials) (Surname)								
5. FORENAMES IN FULL									
6. DECORATIONS AND HONOURS	7. STYLE OR TITLE (e.g. Mr, Sir, Brigadier)								
8. ADDRESS (i)									
(ii)									
(iii) (iv)									
(v)									
9. DATE OF BIRTH	(vi) POSTCODE								
10. TELEPHONE HOME	WORK WORK								
MOBILE	FAX								
E-MAIL									
11. RAISED IN CRAFT LODGE No. ON CONSTITUTION (if not English)									
12. EXALTED IN ROYAL ARCH CHAPTER No. ON CONSTITUTION (if not English)									
JOINING / RE-JOINING MEMBERS  13. MMH MEMBERSHIP NUMBER (if known)									
14. MOTHER PRECEPTORY No.	NAME								
CONSTITUTION									
	(if not English)								
DATE OF INSTALLATION  DATE OF LEAVING  (if applicable)  Resigned, Honorary Member, Outer Guard, Ceased, Excluded, Warrant forfeited									
15. PRECEPTOR OF PRECEPTORY	No. DATE OF INSTALLATION								
16. PRESENT PROVINCIAL RANK	DATE								
17. PRESENT GREAT RANK	DATE								
PLEASE GIVE DETAILS OF ALL THE PR	ECEPTORIES OF WHICH YOU ARE OR HAVE BEEN A MEMBER OVERLEAF								
18. SIGNATURE OF CANDIDATE									
19. SIGNATURE OF PROPOSER	20.SIGNATURE OF SECONDER								
21. THE CANDIDATE WAS INSTALLED/JOINED/RE-JOINED ON									
I hereby certify that the above is a correct record  22. NAME OF REGISTRAR (Initials & Surname)									
23. SIGNATURE OF REGISTRAR	DATED								
24. Enclosed is the Registration Fee of £ PREGFO3 + VAT of £ VATOUTPUT A Total Fee of £ GFDAR									

## CANDIDATE'S MEMBERSHIP DETAILS WITHIN THE ORDER

Please give the numbers of all the Preceptories 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.									
PRECEPTORY No.	*	DATE ADMITTED	**	DATE OF LEAVING	DATE OF INSTALLATION	CONSTIT	TUTION		
PRECEPTORY No.  PRECEPTORY No.	*	DATE ADMITTED  DATE ADMITTED	**	DATE OF LEAVING  DATE OF LEAVING	DATE OF INSTALLATION  DATE OF INSTALLATION	CONSTIT			
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PRECEPTORY No.		DATE ADMITTED	**	DATE OF LEAVING	DATE OF INSTALLATION	CONSTIT			
PRECEPTORY No.	*	DATE ADMITTED	**	DATE OF LEAVING	DATE OF INSTALLATION	CONSTIT			
PRECEPTORY No.	*	DATE ADMITTED	**	DATE OF LEAVING	DATE OF INSTALLATION	CONSTIT	TUTION		
	*Admitte	d, Joined or Founder	**REAS	SON FOR LEAVING:- Resigned,	Honorary Member, Outer Guard, O	Ceased, Excluded, Wa	arrant forfeited		
Any Additional	Comment	S							