

Order of Malta

INSTALLATION RETURN

This form must be completed using typescript or block letters and sent via the Provincial Vice-Chancellor to:
The Chancery of the Orders, 86 St. James's Street, London, SW1A 1PL immediately after the Installation of the Prior.

1. PRIORY NAME

2. NUMBER

3. PROVINCIAL PRIORY

4. PRIOR KNIGHT
(Initials & Surname)

5. FORENAMES IN FULL

6. DECORATIONS AND HONOURS

7. STYLE OR TITLE
(e.g. Mr, Sir, Brigadier)

8. RESIDING AT

(i)

(ii)

(iii)

(iv)

(v)

(vi) POSTCODE

HAVING BEEN REGULARLY ELECTED *(complete one of the following)*

9a. **WAS INVESTED AS**
CAPTAIN-GENERAL / LIEUTENANT-GENERAL* IN PRIORY NUMBER ON

DAY	MONTH	YEAR

and served in the office for a full year, from one installation to the next
** (Delete as applicable)*

9b. OR WAS PREVIOUSLY INSTALLED PRIOR IN PRIORY NUMBER ON

DAY	MONTH	YEAR

9c. OR DISPENSATION NUMBER BEING ISSUED ON

DAY	MONTH	YEAR

AND WAS DULY INSTALLED PRIOR OF THE ABOVE PRIORY ON

DAY	MONTH	YEAR

10. CAPTAIN-GENERAL KNIGHT
(Initials & Surname)

11. FORENAMES IN FULL

12. WAS APPOINTED CAPTAIN-GENERAL AND INVESTED ON

DAY	MONTH	YEAR

13. LIEUTENANT-GENERAL KNIGHT
(Initials & Surname)

14. FORENAMES IN FULL

15. WAS APPOINTED LIEUTENANT-GENERAL AND INVESTED ON

DAY	MONTH	YEAR

If there have been any changes in respect of the below, please tick the appropriate box, and complete the details overleaf.

REGISTRAR TREASURER GREAT OFFICER(S)

16. NAME OF REGISTRAR
(Initials & Surname)

17. SIGNATURE OF REGISTRAR DATED

DAY	MONTH	YEAR

I hereby certify that the above is a correct return

Please take a photocopy of this form when completed and retain it for your Priory records

CHANGE OF DETAILS

Registrar / Treasurer / Great Officer *(delete as necessary)*

1. INITIALS AND SURNAME

2. FORENAMES IN FULL

3. DECORATIONS AND HONOURS 4. STYLE OR TITLE
(e.g. Mr, Sir, Brigadier)

5. ADDRESS

(i)

(ii)

(iii)

(iv)

(v)

(vi) POSTCODE

6. DATE OF BIRTH

DAY	MONTH	YEAR
<input type="text"/>	<input type="text"/>	<input type="text"/>

7. TELEPHONE

HOME WORK

MOBILE FAX

E-MAIL

Registrar / Treasurer / Great Officer *(delete as necessary)*

1. INITIALS AND SURNAME

2. FORENAMES IN FULL

3. DECORATIONS AND HONOURS 4. STYLE OR TITLE
(e.g. Mr, Sir, Brigadier)

5. ADDRESS

(i)

(ii)

(iii)

(iv)

(v)

(vi) POSTCODE

6. DATE OF BIRTH

DAY	MONTH	YEAR
<input type="text"/>	<input type="text"/>	<input type="text"/>

7. TELEPHONE

HOME WORK

MOBILE FAX

E-MAIL

GREAT OFFICER

1. INITIALS AND SURNAME

2. DATE OF RESIGNATION / DEATH / HONORARY / EXCLUSION
(delete as necessary)

DAY	MONTH	YEAR
<input type="text"/>	<input type="text"/>	<input type="text"/>

3. GREAT RANK

GREAT OFFICER

1. INITIALS AND SURNAME

2. DATE OF RESIGNATION / DEATH / HONORARY / EXCLUSION
(delete as necessary)

DAY	MONTH	YEAR
<input type="text"/>	<input type="text"/>	<input type="text"/>

3. GREAT RANK