

**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		3. DIVISION	
2. CONCLAVE NUMBER			
4. COMPANION			
		(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
		MOBILE	FAX
		EMAIL	
PROFESSION (former if retired)			
11. RAISED IN CRAFT LODGE	No.	ON	CONSTITUTION (if not English)
12. EXALTED IN ROYAL ARCH CHAPTER	No.	ON	CONSTITUTION (if not English)
<b>JOINING / RE-JOINING MEMBERS</b>		13. MMH MEMBERSHIP NUMBER (if known)	
14. MOTHER RCC CONCLAVE	No.	NAME	
CONSTITUTION (if not English)		REASON FOR LEAVING Resigned, Honorary Member, Tyler, Ceased, Excluded, Warrant forfeited	
DATE OF INSTALLATION		DATE OF LEAVING (if applicable)	
15. SOVEREIGN OF RCC CONCLAVE	No.	DATE OF ENTHRONMENT AS SOVEREIGN	
16. PRESENT DIVISIONAL RANK		DATE	
17. PRESENT GRAND RANK		DATE	
<b>PLEASE GIVE DETAILS OF ALL THE RCC CONCLAVES OF WHICH YOU ARE OR HAVE BEEN A MEMBER OVERLEAF</b>			
18. SIGNATURE OF CANDIDATE		I solemnly 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			
I hereby certify that the above is a correct record			
22. NAME OF RECORDER (Initials & Surname)			
23. SIGNATURE OF RECORDER		DATED	
24. CHEQUE	BACS	PAYMENT OF	BACS REF.
(Please tick as appropriate)			
			<b>If paying by BACS you MUST enclose receipt of payment with this form</b>

## 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
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CONCLAVE No.	*	DATE ADMITTED	**	DATE OF LEAVING	DATE OF INSTALLATION	CONSTITUTION

\* **A**dmitted, **J**oined or **F**ounder    \*\*REASON FOR LEAVING: - **R**esigned, **H**onorary Member, **T**yler, **C**eased,  
**E**xcluded, **W**arrant forfeited

ADDITIONAL COMMENTS