

The Grand Council of the Order of Royal and Select Masters of England and Wales and its Districts and Councils Overseas

MEMBERSHIP APPLICATION FORM**To be completed by the Candidate for Admission, Joining or Re-joining.****Council Recorder:** This form must to be completed and entered into Keystone Online and sent within fourteen days of admission of the candidate to the District Grand Recorder (with cheque/BACS receipt)**District Grand Recorder:** Check to see if form is updated on Keystone Online and then 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. COUNCIL NAME			
2. COUNCIL NUMBER		3. DISTRICT	
4. COMPANION			
		<i>(Initials)</i>	<i>(Surname)</i>
5. FORENAMES IN FULL			
6. DECORATIONS AND HONOURS		7. STYLE OR TITLE <i>(e.g. Mr, Sir, Brigadier)</i>	
8. ADDRESS			
(i)			
(ii)			
(iii)			
(iv)			
(v)			
9. DATE OF BIRTH		(vi) POSTCODE	
10. TELEPHONE		HOME	
		WORK	
		MOBILE	
		FAX	
		EMAIL	
<i>*If constitution in not English please give details overleaf</i>			
PROFESSION <i>(former if retired)</i>			
*11. RAISED IN CRAFT LODGE	No.	ON	CURRENT RANK
*12. EXALTED IN ROYAL ARCH CHAPTER	No.	ON	CURRENT RANK
*13. ADVANCED IN MARK LODGE	No.	ON	CURRENT RANK
JOINING / RE-JOINING MEMBERS		14. MMH MEMBERSHIP NUMBER	
15. MOTHER RSM COUNCIL	No.	NAME	
CONSTITUTION <i>(if not English)</i>		REASON FOR LEAVING R esigned, H onorary Member, T yer, C eased, E xcluded, W arrant forfeited	
DATE CHOSEN		DATE OF LEAVING <i>(if applicable)</i>	
16. MASTER OF RSM COUNCIL	No.	DATE OF INSTALLATION AS MASTER	
17. PRESENT DISTRICT GRAND RANK		DATE	
18. PRESENT GRAND RANK		DATE	
PLEASE GIVE DETAILS OF ALL THE RSM COUNCILS OF WHICH YOU ARE OR HAVE BEEN A MEMBER OVERLEAF			
19. SIGNATURE OF CANDIDATE			
20. SIGNATURE OF PROPOSER		21. SIGNATURE OF SECONDER	
22. THE CANDIDATE WAS ADMITTED/JOINED/RE-JOINED ON			
<i>I hereby certify that the above is a correct record</i>			
23. NAME OF RECORDER (Initials & Surname)			
24. SIGNATURE OF RECORDER		DATED	
25. CHEQUE	BACS	PAYMENT OF	DATE BACS PAID
<i>(Please tick as appropriate)</i>			
If paying by BACS you <u>MUST</u> enclose receipt of payment with this form			

CANDIDATES MEMBERSHIP DETAILS WITHIN THE ORDER

Please give the numbers of all the Councils 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.

COUNCIL No.	*	DATE ADMITTED	**	DATE OF LEAVING	DATE OF INSTALLATION	CONSTITUTION
COUNCIL No.	*	DATE ADMITTED	**	DATE OF LEAVING	DATE OF INSTALLATION	CONSTITUTION
COUNCIL No.	*	DATE ADMITTED	**	DATE OF LEAVING	DATE OF INSTALLATION	CONSTITUTION
COUNCIL No.	*	DATE ADMITTED	**	DATE OF LEAVING	DATE OF INSTALLATION	CONSTITUTION
COUNCIL 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

CANDIDATES JOINING FROM ANOTHER CONSTITUTION

RAISED IN CRAFT LODGE	No.	ON	CONSTITUTION
ADVANCED IN MARK LODGE	No.	ON	CONSTITUTION
EXALTED IN ROYAL ARCH CHAPTER	No.	ON	CONSTITUTION

IF NOT ADVANCED IN MARK LODGE

PLEASE INDICATE THE LODGE OR CHAPTER THE MARK DEGREE WAS TAKEN TOGETHER WITH THE DATE

No.	ON	CONSTITUTION
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ADDITIONAL COMMENTS

I, the overleaf signatory, hereby consent to the processing of personal data and information supplied in relation to my application by the overleaf named unit of the overleaf named Province/District and the Grand Lodge of Mark Master Masons.
Note: that any data and information supplied will only be divulged to other Masonic Organisations in accordance with the provisions of the Data Protection Notice, available on-line at www.markmasonshall.org/dpn