

MEMBERSHIP APPLICATION FORM

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

Lodge Scribe: This Form is to be completed and sent within fourteen days of admission of the candidate to the Provincial/District Grand Secretary (with cheque/BACS receipt)
Provincial/District Grand Secretary: 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. LODGE NAME	<input style="width:100%;" type="text"/>		
2. LODGE NUMBER	<input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/>	3. PROVINCE/DISTRICT	<input style="width:100%;" type="text"/>
4. BROTHER	<input style="width:100px;" type="text"/> <i>(Initials)</i>	<input style="width:100px;" type="text"/> <i>(Surname)</i>	
5. FORENAMES IN FULL	<input style="width:100%;" type="text"/>		
6. DECORATIONS AND HONOURS	<input style="width:100px;" type="text"/>	7. STYLE OR TITLE <i>(e.g. Mr, Sir, Brigadier)</i>	<input style="width:100px;" type="text"/>
8. ADDRESS	(i)	<input style="width:100%;" type="text"/>	
	(ii)	<input style="width:100%;" type="text"/>	
	(iii)	<input style="width:100%;" type="text"/>	
	(iv)	<input style="width:100%;" type="text"/>	
	(v)	<input style="width:100%;" type="text"/>	
9. DATE OF BIRTH	<input style="width:100px;" type="text"/>	(vi) POSTCODE	<input style="width:100px;" type="text"/>
10. TELEPHONE	HOME	<input style="width:100px;" type="text"/>	WORK <input style="width:100px;" type="text"/>
	MOBILE	<input style="width:100px;" type="text"/>	FAX <input style="width:100px;" type="text"/>
	EMAIL	<input style="width:100%;" type="text"/>	
	PROFESSION <i>(former if retired)</i>	<input style="width:100%;" type="text"/>	
11. ADVANCED IN MARK LODGE	No. <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/>	ON	<input style="width:100px;" type="text"/>
		CONSTITUTION <i>(if not English)</i>	<input style="width:100px;" type="text"/>

JOINING / RE-JOINING MEMBERS

12. MMH MEMBERSHIP NUMBER
(if known)

13. MOTHER RAM LODGE	No. <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/>	NAME	<input style="width:100%;" type="text"/>
CONSTITUTION <i>(if not English)</i>	<input style="width:100px;" type="text"/>	REASON FOR LEAVING Resigned, Honorary Member, Tyler, Ceased, Excluded, Warrant forfeited	<input style="width:20px;" type="checkbox"/>
DATE OF ELEVATION	<input style="width:100px;" type="text"/>	DATE OF LEAVING <i>(if applicable)</i>	<input style="width:100px;" type="text"/>
14. PAST COMMANDER OF RAM LODGE	No. <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/>	DATE OF INSTALLATION AS COMMANDER	<input style="width:100px;" type="text"/>
15. PROVINCIAL/DISTRICT RAM GRAND RANK <i>(please tick appropriate box)</i>	YES <input type="radio"/>	NO <input type="radio"/>	
16. RAM GRAND RANK <i>(Please tick appropriate box)</i>	YES <input type="radio"/>	NO <input type="radio"/>	

PLEASE GIVE DETAILS OF ALL THE RAM LODGES OF WHICH YOU ARE OR HAVE BEEN A MEMBER OVERLEAF

17. SIGNATURE OF CANDIDATE	<input style="width:100%;" type="text"/>		
18. SIGNATURE OF PROPOSER	<input style="width:100px;" type="text"/>	19. SIGNATURE OF SECONDER	<input style="width:100px;" type="text"/>
20. THE CANDIDATE WAS ELEVATED/JOINED/RE-JOINED ON	<input style="width:100%;" type="text"/>		
<i>I hereby certify that the above is a correct record.</i>			
21. NAME OF SCRIBE (Initials & Surname)	<input style="width:100px;" type="text"/>	<input style="width:100px;" type="text"/>	
22. SIGNATURE OF SCRIBE	<input style="width:100px;" type="text"/>	DATED	<input style="width:100px;" type="text"/>

23. **CHEQUE** **BACS** **PAYMENT OF** **DATE BACS PAID** **BACS REF.**
(Please tick as appropriate) **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 RAM Lodges 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.

LODGE No.	*	DATE ADMITTED	**	DATE OF LEAVING	DATE OF INSTALLATION	CONSTITUTION
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
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<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

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

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