

Provincial Grand Lodge of Mark Master Masons of North Wales Prif Gyfrinfa Talaith Y Marc Gogledd Cymru

24a Waen Fawr Estate, Holyhead, Anglesey LL65 1LT

☑ provgsec@northwalesmark.co.uk

*† www.northwalesmark.co.uk

Provincial Installation Return

A Provincial Installation Return is to be completed annually and returned to the Provincial Grand Secretary <u>immediately after the Installation meeting</u>

All information requested by this form must be filled in

Lodge Details

Lodge Name	
Lodge Number	
Date of Installation	

Section A

Please provide details of the WM and newly Appointed Officers:

Office	Full Name of Office Holder	Grand or Provincial Rank	Address in full including Postcode
W.M.			
S.W.			
J.W.			
M.O.			
S.O.			Addresses of Overseers are not required
J.O.			

Section B

Master's Details:

Please provide details of the Craft Lodge in which the newly Installed Worshipful Master has served as a Master **OR** give the Dispensation Number:

Either	Name and Number of Craft Lodge:			
and	Date of Installation in that Lodge:			
OR	Dispensation Number:			
Senior and Junior Warden Details: Please provide the requested details regarding the Senior and Junior Wardens:				
Was the newly appointed Senior Warden invested at the Installation?				
Was the newly appointed Junior Warden invested at the Installation?				
Is the new	yly appointed Senior Warden qualifie office of Worshipful Master by virtud Installed as Master of a r	e of his having been		
IF VFS:				

Name of Craft Lodge	Number	Date of Installation

IF NO:

A Dispensation will be required for the Senior Warden to be Installed as WM at the next Installation. This must be requested in good time. The granting of a Dispensation should not be assumed.

Section C

Particulars of Provincial Grand Officers who are actively participating in Lodge affairs.

In the Remarks column, please comment on attendance, e.g. excellent/good/fair, and on participation in ceremonies. Please also comment if in Office within the Lodge.

Full Name	Present Provincial Rank	Year of Appointment to the Rank	Comments
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Continue on next page if required....

Full Name	Present Provincial Rank	Year of Appointment to the Rank	Comments

Section D Addresses of Secretary and Treasurer

Address of Secretary	Address of Treasurer
Phone:	Phone:
Email:	Email:

I hereby certify that the above is a correct Return:

Name of Secretary	Signature	Date