## The Grand Council of the Order of the Allied Masonic Degrees of England and Wales and Districts and Councils Overseas

## MEMBERSHIP APPLICATION FORM

**AMD** 

To be Completed by the Candidate for Admission, Joining or Re-joining.

This form must be completed using block letters and sent within fourteen days of admission of the candidate via the District Grand Secretary to: The Grand Secretary, Mark Masons' Hall, 86 St James's Street, London SWIA IPL

1. COUNCIL NAME			2 DISTRICT				
2. NUMBER	3.DISTRICT						
4. BROTHER	,			45			
5. FORENAMES IN FULL		Initials)		( Surname)			
6. DECORATIONS AND HONOURS			7. STYLE OR TITLE				
	(i)						
8. ADDRESS	(ii)						
	(iii)						
	(iv) (v)						
9. DATE OF BIRTH		(vi) POSTCODE					
10. TELEPHONE	HOME		. ,				
	MOBILE	WORK					
	EMAIL						
11. RAISED IN CRAFT LODGE			CONSTIT	TUTION ]			
12. EXALTED IN ROYAL ARCH CHAPTER			(If r	not			
13. ADVANCED IN MARK LODGE			Engl	ish)			
JOINING I RE-JOINING ME	MBERS	14. MMH ME	MBERSHIP NO.				
15. MOTHER AMD COUNCIL NO.			NAME				
TO. MOTHER THAN COUNCIL I			CONSTITUTION (if not English)				
DATE OF ADMISSION		DATE OF LEAVING	(if not English)	REASON FOR LEAVING			
				<u>R</u> esigned, <u>H</u> onorary Member, <u>T</u> yler, <u>C</u> eased, <u>E</u> xcluded, <u>W</u> arrant forfeited			
16. MASTER OF AMD COUNCIL NO.			DATE OF INSTALLATION	<del>-</del>			
17. PRESENT DISTRICT GRAND RANK			DA	TE			
18. PRESENT GRAND RANK			DA	TE			
PLEASE GIVE DETAILS OF ALL THE AMD COUNCILS OF WHICH YOU ARE OR HAVE BEEN A MEMBER OVERLEAF							
19. SIGNATURE OF CANDID	ATE						
20. SIGNATURE OF PROPOSER 21. SIGNATURE OF SECONDER							
22.THE CANDIDATE WAS							
I hereby certify that the above is a correct record  23. NAME OF SECRETARY (Initials & Surname)							
24. SIGNATURE OF SECRETARY			DA	TED			
25. Enclosed is the Registration Fee of		+ VAT of	А То	tal Fee of			

## CANDIDATE'S 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.								
COUNCIL No.	*	DATE ADMTTIED	**	DATE OF LEAVING	DATE OF INSTALLATION	CONSTITUTION		
	* Adn	nitted, Joined or Founder	**REA	SON FOR LEAVING:- Resign	ned, Honorary Member, Tyler, Ce	ased, Excluded, Warrant forfeited		
Any Additions	al Comr	nents						