

Grand Imperial Conclave for England, Wales and Territories Overseas of the Masonic and Military Order of the Red Cross of Constantine and the Orders of the Holy Sepulchre and of St. John the Evangelist

ENTHRONEMENT RETURN

This form must be completed using typescript or block letters and sent via the Divisional Grand Recorder to: The Grand Recorder, Registry of the Orders, Mark Masons' Hall, 86 St. James's Street, London, SW1A 1PL immediately after the Enthronement of the Most Puissant Sovereign and the Installation of the Viceroy.

1. CONCLAVE NAME	<input style="width:100%; height:20px;" type="text"/>		
2. NUMBER	<input style="width:25px; height:20px;" type="text"/> <input style="width:25px; height:20px;" type="text"/> <input style="width:25px; height:20px;" type="text"/> <input style="width:25px; height:20px;" type="text"/>		
3. DIVISION	<input style="width:100%; height:20px;" type="text"/>		
4. SOVEREIGN	KNIGHT <i>(Initials & Surname)</i>	<input style="width:25px; height:20px;" type="text"/> <input style="width:25px; height:20px;" type="text"/> <input style="width:25px; height:20px;" type="text"/> <input style="width:25px; height:20px;" type="text"/>	<input style="width:100%; height:20px;" type="text"/>
5. FORENAMES IN FULL	<input style="width:100%; height:20px;" type="text"/>		
6. DECORATIONS AND HONOURS	<input style="width:100%; height:20px;" type="text"/>	7. STYLE OR TITLE <i>(e.g. Mr, Sir, Brigadier)</i>	<input style="width:100%; height:20px;" type="text"/>
8. RESIDING AT	(i)	<input style="width:100%; height:20px;" type="text"/>	
	(ii)	<input style="width:100%; height:20px;" type="text"/>	
	(iii)	<input style="width:100%; height:20px;" type="text"/>	
	(iv)	<input style="width:100%; height:20px;" type="text"/>	
	(v)	<input style="width:100%; height:20px;" type="text"/>	
		(vi) POSTCODE	<input style="width:100%; height:20px;" type="text"/>

HAVING BEEN REGULARLY ELECTED *(complete one of the following)*

9a. WAS INSTALLED AS VICEROY* and served in the office for a full year, from one installation to the next <small>* (Delete as applicable)</small>	IN CONCLAVE NUMBER	<input style="width:25px; height:20px;" type="text"/>	<input style="width:25px; height:20px;" type="text"/>	<input style="width:25px; height:20px;" type="text"/>	<input style="width:25px; height:20px;" type="text"/>	ON	<table border="1" style="font-size: 8px;"><tr><th>DAY</th><th>MONTH</th><th>YEAR</th></tr><tr><td><input style="width:15px; height:15px;" type="text"/></td><td><input style="width:15px; height:15px;" type="text"/></td><td><input style="width:15px; height:15px;" type="text"/></td></tr></table>	DAY	MONTH	YEAR	<input style="width:15px; height:15px;" type="text"/>	<input style="width:15px; height:15px;" type="text"/>	<input style="width:15px; height:15px;" type="text"/>
DAY	MONTH	YEAR											
<input style="width:15px; height:15px;" type="text"/>	<input style="width:15px; height:15px;" type="text"/>	<input style="width:15px; height:15px;" type="text"/>											
9b. OR WAS PREVIOUSLY ENTHRONED AS SOVEREIGN	IN CONCLAVE NUMBER	<input style="width:25px; height:20px;" type="text"/>	<input style="width:25px; height:20px;" type="text"/>	<input style="width:25px; height:20px;" type="text"/>	<input style="width:25px; height:20px;" type="text"/>	ON	<table border="1" style="font-size: 8px;"><tr><th>DAY</th><th>MONTH</th><th>YEAR</th></tr><tr><td><input style="width:15px; height:15px;" type="text"/></td><td><input style="width:15px; height:15px;" type="text"/></td><td><input style="width:15px; height:15px;" type="text"/></td></tr></table>	DAY	MONTH	YEAR	<input style="width:15px; height:15px;" type="text"/>	<input style="width:15px; height:15px;" type="text"/>	<input style="width:15px; height:15px;" type="text"/>
DAY	MONTH	YEAR											
<input style="width:15px; height:15px;" type="text"/>	<input style="width:15px; height:15px;" type="text"/>	<input style="width:15px; height:15px;" type="text"/>											
9c. OR	DISPENSATION NUMBER	<input style="width:25px; height:20px;" type="text"/>	<input style="width:25px; height:20px;" type="text"/>	<input style="width:25px; height:20px;" type="text"/>	<input style="width:25px; height:20px;" type="text"/>	BEING ISSUED ON	<table border="1" style="font-size: 8px;"><tr><th>DAY</th><th>MONTH</th><th>YEAR</th></tr><tr><td><input style="width:15px; height:15px;" type="text"/></td><td><input style="width:15px; height:15px;" type="text"/></td><td><input style="width:15px; height:15px;" type="text"/></td></tr></table>	DAY	MONTH	YEAR	<input style="width:15px; height:15px;" type="text"/>	<input style="width:15px; height:15px;" type="text"/>	<input style="width:15px; height:15px;" type="text"/>
DAY	MONTH	YEAR											
<input style="width:15px; height:15px;" type="text"/>	<input style="width:15px; height:15px;" type="text"/>	<input style="width:15px; height:15px;" type="text"/>											

AND WAS DULY ENTHRONED SOVEREIGN OF THE ABOVE CONCLAVE ON

DAY	MONTH	YEAR
<input style="width:15px; height:15px;" type="text"/>	<input style="width:15px; height:15px;" type="text"/>	<input style="width:15px; height:15px;" type="text"/>

10. VICEROY	KNIGHT <i>(Initials & Surname)</i>	<input style="width:25px; height:20px;" type="text"/> <input style="width:25px; height:20px;" type="text"/> <input style="width:25px; height:20px;" type="text"/> <input style="width:25px; height:20px;" type="text"/>	<input style="width:100%; height:20px;" type="text"/>						
11. FORENAMES IN FULL	<input style="width:100%; height:20px;" type="text"/>								
12.			WAS INSTALLED AS VICEROY ON <table border="1" style="font-size: 8px; margin-left: 10px;"> <tr><th>DAY</th><th>MONTH</th><th>YEAR</th></tr> <tr><td><input style="width:15px; height:15px;" type="text"/></td><td><input style="width:15px; height:15px;" type="text"/></td><td><input style="width:15px; height:15px;" type="text"/></td></tr> </table>	DAY	MONTH	YEAR	<input style="width:15px; height:15px;" type="text"/>	<input style="width:15px; height:15px;" type="text"/>	<input style="width:15px; height:15px;" type="text"/>
DAY	MONTH	YEAR							
<input style="width:15px; height:15px;" type="text"/>	<input style="width:15px; height:15px;" type="text"/>	<input style="width:15px; height:15px;" type="text"/>							

If there have been any changes in respect of the below, please tick the appropriate box, and complete the details overleaf.

RECORDER	<input type="checkbox"/>	TREASURER	<input type="checkbox"/>	GRAND OFFICER(S)	<input type="checkbox"/>
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13. NAME OF RECORDER <i>(Initials & Surname)</i>	<input style="width:25px; height:20px;" type="text"/> <input style="width:25px; height:20px;" type="text"/> <input style="width:25px; height:20px;" type="text"/> <input style="width:25px; height:20px;" type="text"/>	<input style="width:100%; height:20px;" type="text"/>
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14. SIGNATURE OF RECORDER	<input style="width:100%; height:20px;" type="text"/>	DATED	<table border="1" style="font-size: 8px;"><tr><th>DAY</th><th>MONTH</th><th>YEAR</th></tr><tr><td><input style="width:15px; height:15px;" type="text"/></td><td><input style="width:15px; height:15px;" type="text"/></td><td><input style="width:15px; height:15px;" type="text"/></td></tr></table>	DAY	MONTH	YEAR	<input style="width:15px; height:15px;" type="text"/>	<input style="width:15px; height:15px;" type="text"/>	<input style="width:15px; height:15px;" type="text"/>
DAY	MONTH	YEAR							
<input style="width:15px; height:15px;" type="text"/>	<input style="width:15px; height:15px;" type="text"/>	<input style="width:15px; height:15px;" type="text"/>							

I hereby certify that the above is a correct return

Please take a photocopy of this form when completed and retain it for your Conclave records

CHANGE OF DETAILS

Recorder / Treasurer / Grand Officer *(delete as necessary)*

1. INITIALS AND SURNAME

2. FORENAMES IN FULL

3. DECORATIONS AND HONOURS 4. STYLE OR TITLE
(e.g. Mr, Sir, Brigadier)

5. ADDRESS (i)
(ii)
(iii)
(iv)
(v)

6. DATE OF BIRTH

DAY	MONTH	YEAR
<input type="text"/>	<input type="text"/>	<input type="text"/>

 (vi) POSTCODE

7. TELEPHONE HOME WORK
MOBILE FAX
E-MAIL

Recorder / Treasurer / Grand Officer *(delete as necessary)*

1. INITIALS AND SURNAME

2. FORENAMES IN FULL

3. DECORATIONS AND HONOURS 4. STYLE OR TITLE
(e.g. Mr, Sir, Brigadier)

5. ADDRESS (i)
(ii)
(iii)
(iv)
(v)

6. DATE OF BIRTH

DAY	MONTH	YEAR
<input type="text"/>	<input type="text"/>	<input type="text"/>

 (vi) POSTCODE

7. TELEPHONE HOME WORK
MOBILE FAX
E-MAIL

GRAND OFFICER

1. INITIALS AND SURNAME

2. DATE OF RESIGNATION / DEATH / HONORARY / EXCLUSION

DAY	MONTH	YEAR
<input type="text"/>	<input type="text"/>	<input type="text"/>

(delete as necessary)

3. GRAND RANK

GRAND OFFICER

1. INITIALS AND SURNAME

2. DATE OF RESIGNATION / DEATH / HONORARY / EXCLUSION

DAY	MONTH	YEAR
<input type="text"/>	<input type="text"/>	<input type="text"/>

(delete as necessary)

3. GRAND RANK