

OFFICE USE:  
Reg:  
GLMMM:  
MSS:

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

## INSTALLATION RETURN

This form must be completed using typescript or block letters and sent via the District Grand Secretary to:  
The Grand Secretary, Mark Masons' Hall, 86 St. James's Street, London, SW1A 1PL immediately after the Installation of the Master.

1. COUNCIL NAME	<input style="width: 100%;" type="text"/>		
2. NUMBER	<input style="width: 100%;" type="text"/>		
3. DISTRICT	<input style="width: 100%;" type="text"/>		
4. MASTER	BROTHER <i>(Initials &amp; Surname)</i>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
5. FORENAMES IN FULL	<input style="width: 100%;" type="text"/>		
6. DECORATIONS AND HONOURS	<input style="width: 100%;" type="text"/>	7. STYLE OR TITLE <i>(e.g. Mr, Sir, Brigadier)</i>	<input style="width: 100%;" type="text"/>
8. RESIDING AT	(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"/>	
		(vi) POSTCODE	<input style="width: 100%;" type="text"/>

HAVING BEEN REGULARLY ELECTED *(complete the relevant from the following)*

9a. WAS INVESTED AS **SENIOR / JUNIOR WARDEN\*** IN COUNCIL NUMBER  ON 

DAY	MONTH	YEAR
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

 and served in the office for a full year, from one installation to the next  
\* (Delete as applicable)

9b. OR WAS PREVIOUSLY INSTALLED AS **MASTER** IN COUNCIL NUMBER  ON 

DAY	MONTH	YEAR
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

9c. OR DISPENSATION NUMBER  BEING ISSUED ON 

DAY	MONTH	YEAR
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

AND WAS DULY INSTALLED **MASTER** OF THE ABOVE COUNCIL ON 

DAY	MONTH	YEAR
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

10. **SENIOR WARDEN** BROTHER *(Initials & Surname)*

11. FORENAMES IN FULL

12. WAS APPOINTED **SENIOR WARDEN** AND INVESTED ON 

DAY	MONTH	YEAR
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

13. **JUNIOR WARDEN** BROTHER *(Initials & Surname)*

14. FORENAMES IN FULL

15. WAS APPOINTED **JUNIOR WARDEN** AND INVESTED ON 

DAY	MONTH	YEAR
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

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

SECRETARY       TREASURER       GRAND OFFICER(S)

16. NAME OF SECRETARY *(Initials & Surname)*

17. SIGNATURE OF SECRETARY  DATED 

DAY	MONTH	YEAR
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" 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 Council records

# CHANGE OF DETAILS

## Secretary / 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)

(vi) POSTCODE

6. DATE OF BIRTH

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

7. TELEPHONE

HOME

WORK

MOBILE

FAX

E-MAIL

## Secretary / 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)

(vi) POSTCODE

6. DATE OF BIRTH

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

7. TELEPHONE

HOME

WORK

MOBILE

FAX

E-MAIL

## GRAND OFFICER

1. INITIALS AND SURNAME

2. DATE OF RESIGNATION / DEATH / HONORARY / EXCLUSION  
*(delete as necessary)*

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

3. GRAND RANK

## GRAND OFFICER

1. INITIALS AND SURNAME

2. DATE OF RESIGNATION / DEATH / HONORARY / EXCLUSION  
*(delete as necessary)*

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

3. GRAND RANK