

PETITIONER APPLICATION FORM

To be completed by a Petitioner of a New Council

This form must be completed using typescript or block letters and sent to the Organising Secretary

1. PROPOSED COUNCIL NAME	<input style="width:100%;" type="text"/>		
2. MMH MEMBERSHIP NUMBER	<input style="width:50%;" type="text"/>	<i>(if known)</i>	
3. CURRENT RANK	<input style="width:100%;" type="text"/>		
4. PETITIONER No.	<input type="checkbox"/> <input type="checkbox"/> AS SHOWN ON PETITION FORM <i>(to be completed by Organising Secretary)</i>		
5. BROTHER	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input style="width:100%;" type="text"/>	
	<i>(Initials)</i>	<i>(Surname)</i>	
6. FORENAMES IN FULL	<input style="width:100%;" type="text"/>		
7. DECORATIONS AND HONOURS	<input style="width:50%;" type="text"/>	8. STYLE OR TITLE	<input style="width:50%;" type="text"/>
		<i>(e.g. Mr, Sir, Brigadier)</i>	
9. 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"/>	
			(vi) POSTCODE
10. DATE OF BIRTH	<input style="width:100%;" type="text"/>		
11. TELEPHONE	HOME	<input style="width:50%;" type="text"/>	WORK <input style="width:50%;" type="text"/>
	MOBILE	<input style="width:50%;" type="text"/>	FAX <input style="width:50%;" type="text"/>
	EMAIL	<input style="width:100%;" type="text"/>	

Please give the numbers of all A.M.D. 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 ADMITTED	**	DATE OF LEAVING	DATE OF INSTALLATION	CONSTITUTION
<input type="text"/>	<input type="text"/>	<input style="width:50%;" type="text"/>	<input type="text"/>	<input style="width:50%;" type="text"/>	<input style="width:50%;" type="text"/>	<input style="width:100%;" type="text"/>
<input type="text"/>	<input type="text"/>	<input style="width:50%;" type="text"/>	<input type="text"/>	<input style="width:50%;" type="text"/>	<input style="width:50%;" type="text"/>	<input style="width:100%;" type="text"/>
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<input type="text"/>	<input type="text"/>	<input style="width:50%;" type="text"/>	<input type="text"/>	<input style="width:50%;" type="text"/>	<input style="width:50%;" type="text"/>	<input style="width:100%;" type="text"/>
<input type="text"/>	<input type="text"/>	<input style="width:50%;" type="text"/>	<input type="text"/>	<input style="width:50%;" type="text"/>	<input style="width:50%;" type="text"/>	<input style="width:100%;" type="text"/>

* Admitted, Joined or Founder

** REASON FOR LEAVING:- Resigned, Honorary Member, Tyler, Ceased, Excluded, Warrant forfeited

N.B. Supply clearance certificates for all Councils of which you are no longer a subscribing member.

SIGNATURE OF PETITIONER

AMD DEGREES

DATE ADMITTED

COUNCIL NAME

COUNCIL No.

ST LAWRENCE THE MARTYR

ON

IN

KNIGHT OF CONSTANTINOPLE

ON

IN

GRAND TILERS OF SOLOMON

ON

IN

RED CROSS OF BABYLON

ON

IN

GRAND HIGH PRIEST

ON

IN

CONSTITUTION *(If not English)*

ADDITIONAL INFORMATION