

Grand Council of the Order of Royal and Select Masters of England and Wales and its Districts and Councils Overseas

Silver Trowel - Certificate Application Form

To be Completed by the District Grand Recorder

This form must be completed using typescript or block letters and sent within fourteen days of completion of the degree by the candidate via the District Grand Recorder to:
The Grand Recorder, Mark Masons' Hall, 86 St. James's Street, London, SW1A 1PL

1. DISTRICT

GRAND COUNCIL CERTIFICATE RECIPIENT

2. COMPANION

(Initials)

(Surname)

3. FORENAMES IN FULL

4. MMH MEMBERSHIP NUMBER (if known)

5. INSTALLED AS T.I.M.

ON

DATE

IN

COUNCIL NAME

COUNCIL No.

6. ANOINTED IN SILVER TROWEL ON

DATE

IN

COUNCIL NAME

COUNCIL No.

7. FEE ENCLOSED

£

(cheques made payable to GLMMM)

8. NAME OF DISTRICT GRAND RECORDER (Initials & Surname)

9. SIGNATURE OF DISTRICT GRAND RECORDER

DATED

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

I hereby certify that the above is correct and enclose the appropriate registration fee