

Grand Imperial Conclave for England and Wales and its Divisions and Conclaves 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

**REQUEST FOR DISPENSATION IN RESPECT OF A CONCLAVE**

To be Completed by the Sovereign and Recorder

This form must be completed using typescript or block letters and sent via the Divisional Grand Recorder to: The Grand Recorder, Registry of the Order, Mark Masons' Hall, 86 St. James's Street, London SW1A 1PL

**TO THE MOST ILLUSTRIOUS GRAND SOVEREIGN**

*we, the undersigned, being the Sovereign and Recorder of*

1. CONCLAVE

2. NUMBER

3. DIVISION

*respectfully request on behalf of the members of the Conclave that a Dispensation be granted for the following reason(s)*

- (i) To enable a meeting of the Conclave to be held on  (Please tick appropriate box)  
(Which is not a regular meeting date as detailed in the bylaws)
- (ii) To enable a meeting of the Conclave to be held at the following place.   
  
(Which is not the venue detailed in the bylaws)
- (iii) The Warrant of the Conclave not being available, for the reasons detailed overleaf, the members desire to hold a meeting of the Conclave without the Warrant.
- (iv) For reasons detailed overleaf.

NAME OF RECORDER

(Initials & Surname)



SIGNATURE OF RECORDER

NAME OF SOVEREIGN

(Initials & Surname)



SIGNATURE OF SOVEREIGN

RECOMMENDED BY

(Initials & Surname)



SIGNATURE OF  
INTENDANT GENERAL

DATE

**NOTES**

- This petition must reach the Grand Recorder with the appropriate fee at least three weeks before the date of the meeting and **MUST** be recommended by the Intendant General when applicable.
- A Dispensation, if granted, will be sent to the Divisional Recorder.

**OFFICIAL USE ONLY**

DISPENSATION No.

FEE RECEIVED £

ANY ADDITIONAL COMMENTS

### CHANGE OF DETAILS

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

RECORDER

TREASURER

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

1. INITIALS AND SURNAME	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="text"/>						
2. FORENAMES IN FULL	<input type="text"/>							
3. DECORATIONS AND HONOURS	<input type="text"/>	4. STYLE OR TITLE <i>(e.g. Mr, Sir, Brigadier)</i> <input type="text"/>						
5. ADDRESS	(i)	<input type="text"/>						
	(ii)							
	(iii)							
	(iv)							
	(v)							
6. DATE OF BIRTH	<table border="1"><tr><td>DAY</td><td>MONTH</td><td>YEAR</td></tr><tr><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr></table>	DAY	MONTH	YEAR	<input type="text"/>	<input type="text"/>	<input type="text"/>	(vi) POSTCODE <input type="text"/>
	DAY	MONTH	YEAR					
<input type="text"/>	<input type="text"/>	<input type="text"/>						
7. TELEPHONE	HOME	<input type="text"/>	WORK	<input type="text"/>				
	MOBILE	<input type="text"/>	FAX	<input type="text"/>				
	E-MAIL	<input type="text"/>						