

The Grand Lodge of Mark Master Masons of England and Wales and its Districts and Lodges Overseas

DISPENSATION IN RESPECT OF A MASTER ELECT

To be completed by the Master and Secretary

Lodge Secretary: This Form is to be completed and sent to the Provincial/District Grand Secretary (with cheque/BACS receipt)

Provincial/District Grand Secretary: Please forward with cheque to The Registrations Department, Mark Masons' Hall, 86 St. James's Street, London SW1A 1PL, or via email, only if paying by BACS and accompanied with BACS receipt to registrations@mmh.org.uk

Any request for a dispensation received less than 21 days before it is required will be treated as a nunc pro tunc and charged accordingly

TO THE MOST WORSHIPFUL GRAND MASTER *we, the undersigned, being the Master and Secretary of*

1. LODGE NAME
2. NUMBER
3. PROVINCE/DISTRICT

respectfully request on behalf of the members of the Lodge that a Dispensation be granted to enable

4. BROTHER *Initials & Surname*

5. FORENAMES IN FULL

6. DECORATIONS AND HONOURS

7. STYLE OR TITLE

(e.g. Mr, Sir, Brigadier)

8. ADDRESS (i)

(ii)

(iii)

(iv)

(v)

(vi) POSTCODE

to be Installed as Master of this Lodge,

notwithstanding that contrary to the Constitutions and Regulations

(Please tick the appropriate box)

- (i) He has not previously served the office of Warden in a Lodge of Mark Master Masons for one complete year, that is from one Installation to the next.
- (ii) He has not previously served the office, of Master of a regular Craft Lodge of Freemasons.
- (iii) He is not a subscribing member of a regular Craft Lodge of Freemasons.
- (iv) He is at present Master of Lodge No.
and will still be occupying that office on the date of the Installation Meeting of this Lodge.
- (v) He has been re-elected to continue as Master of the Lodge for a third consecutive year.
- (vi) For reasons detailed overleaf.

we are pleased to confirm that Brother

*(Initials &
Surname)*

was regularly elected as Master for the ensuing year ON

and it is considered that it will be in the best interest of the Lodge and for the good of the Order generally if he is Installed as Master ON

NAME OF SECRETARY *(Initials &
Surname)*

SIGNATURE OF SECRETARY

DATE

NAME OF MASTER *(Initials &
Surname)*

SIGNATURE OF MASTER

DATE

RECOMMENDED BY *(Initials &
Surname)*

SIGNATURE OF PROVINCIAL/
DISTRICT GRAND MASTER

DATE

9. CHEQUE BACS PAYMENT OF BACS REF.
- (Please tick as appropriate)*

**If paying by BACS you MUST
enclose receipt of payment
with this form**

This form should be accompanied with the appropriate fee at least 21 days before the date of Installation and **MUST** be recommended by the Provincial/District Grand Master when applicable.

Office use

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Invoice NPT Dispen No.

ANY ADDITIONAL COMMENTS