

# Grand Lodge of Mark Master Masons of England and Wales and its Districts and Lodges Overseas REQUEST FOR DISPENSATION IN RESPECT OF A MASTER ELECT

To be Completed by the Master and Secretary

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

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 another Lodge of Mark Master Masons 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

NAME OF MASTER (Initials & Surname)

SIGNATURE MASTER

RECOMMENDED BY (Initials & Surname)

SIGNATURE OF PROVINCIAL / DISTRICT GRAND MASTER

DATE

### NOTES

1. This petition must reach the Grand Secretary with the appropriate fee at least three weeks before the date of Installation and **MUST** be recommended by the Provincial/District Grand Master when applicable.
2. A Dispensation, if granted, will be sent to the Provincial/District Grand Secretary.

### 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.

SECRETARY

TREASURER

#### Secretary / Treasurer *(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) <input type="text"/>							
	(iii) <input type="text"/>							
	(iv) <input type="text"/>							
	(v) <input type="text"/>							
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"/>							