|  |  |
| --- | --- |
| Supreme Grand Chapter of EnglandLP&A4INSTALLATION RETURN | Valid to\_\_\_/\_\_\_For SGC use only |

of Principals, and Past Principals of Chapters under the English Constitution,

being Subscribing Members

of the       Chapter No.

 Installation Date

 Prescribed in By-Laws

Meeting at

who claim a right to sit and vote in the Supreme Grand Chapter, Pursuant to Royal Arch Regulations 5 and 60.

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TO BE MADE **IMMEDIATELY** AFTER THE INSTALLATION OF PRINCIPALS, AND FORWARDED, IF APPLICABLE,

TO THE PROVINCIAL GRAND SCRIBE E, PROVINCIAL OFFICE, 6 GOLDEN HILL LANE, LEYLAND PR25 3NP

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Surname | Forenames (in full) | Date of Installation of Principals | Installed as Master in Lodge No. |
|  |  |  | DD | MM | YYYY |  |
| Z |       |       |    |    |      |       |
| H |       |       |    |    |      |       |
| J |       |       |    |    |      |       |

### If any of the Principals were not installed at the Installation Convocation please state the reason in the space reserved for the date. The Grand Scribe E should be notified of the date of the Installation as soon as it has taken place.

Please enclose a copy of any Dispensation issued to regularise:

1. Change of the date of the Convocation
2. The election of a Principal
3. The Installation of a Principal

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Names of Qualified Subscribing Past Principals either OF or IN the Chapter.**

N.B.; Only Past First Principals of Chapters under the English Constitution, including Grand Officers, to be entered.

Honorary Members must not be included after notification of Election

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name and Initials*(Block Letters)* | Chapter Nos. in which served as First Principal | Years when Installed | Name and Initials*(Block Letters)* | Chapter Nos. in which served as First Principal | Years when Installed |
|       |       |       |       |       |       |
|       |       |       |       |       |       |
|       |       |       |       |       |       |
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|       |       |       |       |       |       |

The certificate on the reverse must be completed by the M.E.Z and Scribe E **Continued on back**

**Subscribing Past Masters (continued)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name and Initials*(Block Letters)* | Chapter Nos. in which served as First Principal | Years When Installed | Name and Initials*(Block Letters)* | Chapter Nos. in which served as First Principal | Years When Installed |
|       |       |       |       |       |       |
|       |       |       |       |       |       |
|       |       |       |       |       |       |
|       |       |       |       |       |       |
|       |       |       |       |       |       |
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|       |       |       |       |       |       |

Almoner’s Name (Block Letters)

Address:       Postcode:      Telephone No.       Mobile Telephone No.

Email:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Charity Steward’s Name (Block Letters)

Address:       Postcode:      Telephone No.       Mobile Telephone No.

Email:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

We, the undersigned, declare that the Installation Return now completed is a true record of the Installation of the Principals and of the Past Principals of and in the Chapter who are entitled to attend Grand Chapter in accordance with the provisions of Royal Arch Regulations 5 and 60. We also give agreement to receiving papers from the Supreme Grand Chapter of England in Electronic format.

|  |  |
| --- | --- |
| Signature of MEZ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Name (Block Letters) |       |
| Address: |       |
| Postcode |       |
| Telephone (H)  |       |
| Mobile:  |       |
| Email address: |       |
| Dated this        | day of       20    |
| Signature of Scribe E | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | N.B.: Please tick box if there is any alterationin name and/or address of Secretary [ ]  |
| Name (Block Letters) |       |  |  |
| Address: |       |  |  |
| Postcode |       |  |  |
| Telephone (H)  |       |  |  |
| Mobile:  |       |  |  |
| Email address: |       |  |  |