The 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

KHS CERTIFICATE APPLICATION FORM

To be Completed by the Conclave Recorder

This form must be completed using typescript or block letters and sent within fourteen days of admission of the candidate via the Divisional Recorder to:

The Grand Recorder, The Registry of the Order, Mark Masons' Hall, 86 St. James's Street, London SW1A 1PL

1.	. CONCLAVE NAME			
2.	NUMBER			
3.	. DIVISION			
KNIGHT OF THE HOLY SEPULCHRE AND ST. JOHN THE EVANGELIST CERTIFICATE RECIPIENT				
4.	WORTHY KNIGHT (Initials & Surname)		
5.	FORENAMES IN FULL			
6.	6. MMH MEMBERSHIP NUMBER (if known)			
		DATE RECEIV	VED	
7.	APPENDANT ORDERS	ON		
			SANCTUARY AND COMMANDERY NAME	NUMBER
		IN	OR	
			DIVISION NAME	
		IN		
8. NAME OF RECORDER (Initials & Surname)				
9.	. SIGNATURE OF RECORDER		DA	ГЕD