## DISTRICT GRAND ROYAL ARCH CHAPTER OF DOWN



## **Candidate Application for Membership**

(All answers to be PRINTED in BLOCK CAPITALS)

Application for Membership of	••••••	Chapter No
Meeting at	in	the District of
Full Name		
Home Address		
Email Address	Mobile phone numl	ber
How long resident at present address?		
If under one year, state previous address		
Date of Birth Married or Singl	e	
Occupation or Profession		
(If retired/unemployed state last Occupation)		
Name of Employer, and Address		
Have you ever applied for Membership of a RA	Chapter before ?	YES / NO (Delete as appropriate)
What was the result of your Application ?	ACCEPTED / NO	T ACCEPTED (Delete as appropriate)
<b>ALL</b> the above Statements are <b>TRUE &amp; COR</b> understand this information will be treated in <b>ST</b> supplied by me has been found to be inaccurate after my acceptance into the Order it may render	<b>FRICTEST CONFIDE</b> or false this will rend	ENCE. If at a later date any of the information ler my application void or/ and if discovered
Candidate Signature:	Date	:
Data to be used for Internal Administrative	purposes of the Supren	ne Grand Royal Arch Chapter of Ireland

I

Completed Form to be returned to and retained by The Registrar of the Royal Arch Chapter where the Candidate is to be proposed.

and its Members and Affiliates and will NOT be provided to ANY Third Party.