



**CONFIDENTIAL**

*Please complete this form whenever a member leaves a Preceptory. Do not use this form to record the death of a member.*

Preceptory Number ..... Preceptory Name.....

Surname ..... Forenames.....

Address .....

Telephone..... E-mail.....

Date of Birth .....

Date Installed ..... or Date Joined.....

Date Left ..... Great/Provincial Rank held on leaving.....

**Reason (Please tick)**

- Resigned
- Excluded
- Ceased Membership

**Reasons for leaving (Please tick any that apply) Underline main reason**

- Change of employment making attendance difficult
- Family commitments
- Financial problems
- General loss of interest
- Pressure to progress in office
- Inadequate disabled access provision at meeting place
- Lack of transport
- Perceived incompatibility with occupation
- Moved out of area, making attendance difficult
- Health difficulties
- Friction or disharmony with Preceptory or individual members
- Pressure to learn ritual
- Pressure to attend more frequently
- Times or dates of Meeting
- Perceived religious incompatibilities
- Unable to contact member at last known address

**Would he consider joining another Preceptory ? (Please tick)**

- Yes, in this Province
- Yes, in another Province
- No

Signed.....Preceptory Registrar

Date .....

Please include any relevant comments or observations on the reverse of this form and return it to the Provincial

Vice-Chancellor