

**GRAND COMMANDERY OF KNIGHTS TEMPLAR
OF VIRGINIA**

APPLICATION FOR VETERAN'S EMBLEM

Name of Sir Knight _____
(First Name) (Middle Name) (Last Name)

Member of _____ Commandery No. _____

MASONIC HISTORY

Place of Birth _____ Date _____

Knights in _____ Commandery No. _____

Located at _____ Date _____

Affiliated _____ Commandery No. _____

Located at _____ Date _____

Withdrawn from _____ Commandery No. _____

Located at _____ Date _____

Affiliated with _____ Commandery No. _____

Located at _____ Date _____

Withdrawn from _____ Commandery No. _____

Located at: _____ Date _____

Date Suspended _____ In _____ Commandery No. _____

Date Reinstated _____ In _____ Commandery No. _____

Total Years in Good Standing _____

SEAL

Recorder

Date _____

Please account for all of the time elapsed between the date of the applicant's Knighting and the present date. Enter other pertinent data on the reverse side of this form. This form to be used in applying for all Templar veterans emblems.

Send one copy to the Grand Recorder
Keep one copy for the Commandery records