



DAVID V. MOORE GRAND GUILD
APPLICATION FOR MEMBERSHIP

Order of Heroines of Templar Crusades Ohio Jurisdiction, P.H.A.

To the Officers and Members of

_____ Guild No. _____

At _____, OHIO: Contact Telephone Number _____

Having received a favorable impression of your Chivalric Order from Observation of your Guild. I herewith present myself as a candidate for Initiation, with a view to further advancement and membership.

For Female Applicants

My eligibility is through _____

Relation _____

Membership _____ Commandery No. _____

I am a member of _____ Chapter No. _____ O.E.S.

For Male Applicants

I am a Financial member of _____ Commandery No. _____ Knight Templar

I have never been rejected for membership in any Guild of H.O.T.C. If accepted, I promise to be governed by the laws and rules of this order.

Print Name _____

Signature _____

Address _____

Vouchers

Fee Paid _____

Rev. WRB, 2018



DAVID V. MOORE GRAND GUILD

Heroines of the Templar Crusades

INSPECTION REPORT

GUILD _____ NO _____ DATE _____

Signature _____ Princess Captain _____ Secretary _____

Amount of Rent _____ Paid to _____

Membership _____ Members Present at Meeting _____

Rituals owned by Guild _____ Rituals owned by members _____

Constitutions owned by Guild _____ Constitutions owned by Members _____

Does Guild have all Paraphernalia? Y/N. What is needed? _____

Are all members regaled? Y/N Percentage regaled _____ %

Is Charter present? Y/N Date of next initiation _____ Required Officers Bonded Y/N

Are Officers proficient in opening? Y/N Were you received correctly __ Agenda __

What needs work? _____

Dollar amount of Gifts to Charity _____ Minutes in bound books? Y/N

Charitable work done/planned? _____ Recommendations _____

Balance in Checking \$ _____ Savings \$ _____ Taxes Paid _____

Investments \$ _____ Total \$ _____ Budget Report handle correctly _____

Annual Budget? _____ Y/N Annual Audit _____ Date _____

Where is Guild's paraphernalia stored? _____

Overall Status of the Guild _____

Signature _____ Grand Deputy Lecturer _____ Date _____