

NAME OF APPLICANT

HOME (office use only)



## APPLICATION FORM - PART 1 (GENERAL)

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# Temporary or Permanent residence in an RMBI Home

### IMPORTANT INFORMATION

Please complete all sections of this application form and return it to the Home Manager at your first choice Home. Forward the Proof of Eligibility form to the Secretary or Almoner of the relevant Lodge.

If you need any help or advice completing this form, contact the Home Manager at your first choice Home.

**Royal Masonic Benevolent Institution**

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*Caring for older Freemasons and their dependants for over 160 years*

**1: WHICH HOME ARE YOU APPLYING TO?**

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First choice:

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Second choice:

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**2: ACCOMMODATION REQUIRED**

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**a) Permanent residence:** accommodation required

Sheltered       Residential       Nursing       Dementia Support Unit

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*Please indicate when you would like to move into the Home*

0-6 months       7-12 months       1-2 years       2 years or more

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**b) Temporary residence:** please indicate requested dates of stay

From:

To:

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How will your fees for Temporary residence be funded: please tick as applicable

Self-funded       Local Authority Funded       Other (please specify)

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**3: ABOUT YOU**

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Surname:

Forename/s:

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Date of birth:

National Insurance No.

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Home address:

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Post Code:

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Telephone No.

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**4: ABOUT YOUR NEXT OF KIN**

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Surname:

Forename/s:

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Their relationship to you:

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Address:

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Post Code:

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Telephone No.

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Email Address:

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**5: YOUR ELIGIBILITY / YOUR RELATIONSHIP TO FREEMASONRY** *(please tick one option)*

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**a) I am a Freemason and would like to live/stay in the above Home**

My Lodge number:

Province:

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**b) I am a Freemason and would like to live/stay in the above Home with my wife**

My Lodge number:

Province:

Wife's name in full:

Wife's date of birth:

Date of Marriage:

*Please enclose copy of your marriage certificate and your wife's birth certificate*

**c) I am a widow of a Freemason**

Date of (last) marriage:

Date of (last) husband's death:

My Husband's Lodge number:

Province:

*Please enclose copy of your marriage certificate and your husband's death certificate*

**d) I am a dependant relative of a Freemason**

My Lodge number:

Province:

Name of Freemason:

Relationship to Freemason:

**e) Any other non Masonic applicant/special case**

Relevant information:

## **6. YOUR PERSONAL CIRCUMSTANCES**

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Why do you wish to live in an RMBI Home?

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Do you have any problems with your health: *(Please provide brief details)*

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Please provide your GP's name and address

Name:

Address:

Post Code:

