

GRAND REPRESENTATIVE APPLICATION

NAME:

ADDRESS:

PHONE:

EMAIL:

ASSEMBLY:

PREVIOUS GRAND REPRESENTATIVE APPOINTMENTS:

DO YOU HAVE A PREFERENCE FOR A CERTAIN STATE? IF YES, WHICH ONE?

Being a Grand Representative is one of the most important offices a Grand Assembly can appoint. The Grand Representatives are the communication link between Vermont and the other Jurisdictions. This responsibility should not be entered upon lightly. Please read the following information and sign below as indication that you understand the responsibilities required of being a Grand Representative.

I, the undersigned, do understand that I will be required to attend all state functions unless prior permission has been received from the Supreme Deputy. I do understand that I am required to support the Grand Worthy Advisor's projects and programs. I do understand that I am required to continue my support to my local Assembly. I do understand that I will be required to follow the rules and regulations of the Grand Assembly. I do understand that failure to abide by these requirements may result in my dismissal as a Grand Representative. I do understand that I may not receive the jurisdiction that I have requested.

Signature of applicant

Signature of Mother Advisor