



Grand Lodge of Mark Master Masons of India

Application for Admission to Membership of

Mark Lodge SAKTHI No.121



To be filled up by ALL Candidates

Name in Full	CHENNIMALAI BALAKRISHNAN
Address	32, Mathesiappan Koil street-4 Gobichettypalayam, Tamil Nadu - 638452
Date of Birth / Age	10-08-1973 / 52
Profession or Occupation	Territory Manager, Star Health Insurance

To be filled up by Candidates for Advanced only

Give Name, Number and Constitution of Lodge / Lodge of which you are, and at any time have been a member, Certificate of good standing from all such Lodge, as well as your Grand Lodge of Mark Master Masons Certificate, must be produced.*

Give Name, Number and Constitution of Lodge in which Initiated, and DATE of Initiation.	UZHAVAN, 434 & 17-02-2024
Give Name, Number and Constitution of Lodge in which raised, and DATE of Raising.	UZHAVAN, 434 & 29-09-2024
GLC No. and Date of Issue	37582 & 27-12-2024

(*These Certificates should be returned to the Candidate after Inspection by the Secretary of the Mark Lodge)

Date 13-12-2025	Signature of Candidate (Advanced, Joining or Re-Joining)
Name of the Proposer W.Bro. AVINASIAPPAN KARTHIKEYAN	Signature of the Proposer
Name of the Seconder W.Bro. SUBRAMANIAM KRISHNAMURTHY	Signature of the Seconder

Certificate of Secretary

I certify that the above application was read in open Mark Lodge immediately before the ballot was taken

Candidate was balloted in this Mark Lodge on

1 3 1 2 2 0 2 5

Candidate was advanced/rejoined/joined in this Mark Lodge on

1 3 1 2 2 0 2 5

Name of Secretary

W.Bro. KUMARASAMY SHANMUGASUNDARAM

9842722395

kssundaram1957@gmail.com

Signature of Secretary

NOTES

1. This form is to be handed over to the Secretary of the Lodge previous to the Convocation at which the proposition is to be made.
2. After Completing his certificate above, the Secretary will retain the Application as a permanent record of the Lodge.