

YORK RITE SOVEREIGN COLLEGE OF NORTH AMERICA

500 Temple Avenue, Detroit MI 48201-2693 Fax: 313-833-7735 or email: yrsc_na@yahoo.com

Grand Governor Official Visitation Report State or Province of _____

After a visitation, to be completed and forwarded immediately to the Secretary General's office at the above address, and a copy to R.E.D. David P. Hardie at 328 Brewery Lane, Orillia, ON L3V 7H6 or Fax: 705-259-1603 or email: abbadoc@rogers.com

York Rite College: _____ No. _____, Location: _____

Date of Official Visitation: _____ 201__ Assembly Type: []Annual []Regular []Special Event

Number of Officers present? _____ Members? _____ Visitors? _____ Candidates? _____ Total present _____?

Average attendance during year(Aug-Aug)_____ Number of visits by G.G. and/or D. G.G. during year_____

Was there a lunch or dinner? []Yes []No Number of Ladies present? _____ Does the College involve their ladies at any of their Assemblies? []Yes []No How? _____

Number of Assemblies per year _____. Is timely notice of College Assemblies given? []Yes []No Does the College use email to distribute Notices? []Yes []No Correspondence by E-mail? Yes [] No []

What is the Joining Fee \$ _____ Annual Member Cost \$ _____ Life Membership? []Yes []No \$ _____

Is an annual budget prepared? []Yes []No Are the College finances []Excellent []OK []Not Satisfactory?

Does the College recommend /promote? Gold Honor Award [] Service Award [] Athelstan Nobility Jewel []

On a scale of 1 to 10 the administrative function of this College _____ (10 = excellent, 1 = very poor)

Number of College members who attended the last General Assembly of the York Rite Sovereign College? _____

What does this College do? How is it fulfilling the Purposes of the York Rite Sovereign College? (Please be specific)

Number of officers reciting the opening and closing from memory? ____ of 7 Number of times the Order of Knight of York **will** be conferred this term? ____ Proposed number of Candidates this coming year? ____ Number of Candidates last year____. Are appropriate costumes / robes for the drama portion used? (Second Section) []Yes []No On a scale of 1 to 10 ceremonial function of this College _____ On a scale of 1 to 10 the overall condition and effectiveness of this College _____ Comments: _____

Additional Remarks or Recommendations: Please mark this box [] and use a separate page or the back of this form.

!! Your narrative of the visit and your impressions are most important. !!

Complete the following only if the Order of Knight of York is conferred during your visit.

Was the Order Knight of York conferred in full form? []Yes []No Number of Candidates? _____

Was the First Section conferred from memory? []Yes []No Second? []Yes []No Third? []Yes []No

Was the Prologue given from memory? []Yes []No Rose Lecture? []Yes []No

Signature of the Grand Governor: _____ Date: _____

Revised: 07/22/13