

Personal Histoire for 2025-2026

Attach Photo

Personal

Your Name: _____

Your Office/Chairmanship _____

Name and relationship of the person through which you gained eligibility. Please include if your eligibility is through your own service.

Name: _____ Relationship: _____

Branch of service: _____

Eight and Forty

Name and Number of Salon: _____

Are you a Charter Partner? _____ Year Joined: _____

Petite Salon Offices Held:

Departemental Offices Held:

National Offices Held:

Other Information you would like to Share:

Feel free to add another sheet if you have further information you would like to submit on your personal history.

Submit to L'Archiviste Nationale, Lisa Hoyland, 1115 61st Street South Gulfport, FL 33707 or email to lhoyland277@gmail.com