

Petition for the Grant or Registration of Armorial Emblems

1. Application			
<p>I, the undersigned, hereby petition the Royal House of Georgia for the</p>	<div style="text-align: center;"> <input type="checkbox"/> Granting of New Heraldic Emblems <small>or</small> <input type="checkbox"/> Registration of Existing Heraldic Emblems* </div>		
<p><i>*Apply for Registration only if your arms were granted by a recognized heraldic authority or if you can prove consistent familial use over generations.</i></p>			
<p>Letters Patent Format</p>	<input type="checkbox"/> Option A only <i>Default signed and sealed 8½ x 11 inches (21.5 x 28 cm) multi-page document</i>	<input type="checkbox"/> Option B <i>Professional 11x14 inches (28 x 35.5 cm) print, perfect for framing, presented in a padded and embossed document holder</i>	<input type="checkbox"/> Option C <i>An illuminated manuscript in the medieval tradition, hand painted and engrossed on calfskin vellum by Tania Crossingham</i>
<p>Exemplification <i>(artwork)</i> <i>The College is unable to accept artwork created by external artists.</i></p>	<div style="text-align: center;"> <input checked="" type="checkbox"/> Exemplification <i>A straightforward painting of your arms that is kept for our records, and is added to letters patents A and B</i> </div>		
<p><i>When submitting this form, please include a copy of your CV or resume and any images of your emblems you might have.</i></p>			

2. Petitioner's Personal Details						
Full Name				Country of Birth		
Birth Date <small>(MM-DD-YYYY)</small>			Sex	<input type="checkbox"/> Male <input type="checkbox"/> Female	Telephone <small>Check preferred</small>	<input type="checkbox"/> Home: <input type="checkbox"/> Mobile: <input type="checkbox"/> Office:
E-mail				Occupation		
Address				City or Town		
State, Province or Region			Country			Postal Code <small>(ZIP code)</small>
Marital Status			Name of Spouse <small>If applicable</small>			
<p>Descendants and other Relatives*</p> <p><i>Specify their:</i></p> <p>1. <i>Relationship to petitioner</i></p> <p>2. <i>Full name</i></p>						



3. Date of birth

If needed, use the space at the end of the form.

*Please note that only your name appears on our Letters Patent. The names of any relatives you include will be kept in our records along with your patent.

3. Medals, Orders and Titles

Are you the recipient of any of the following Royal Georgian Orders or Medals?	<input type="checkbox"/> Order of the Eagle of Georgia <i>at the grade of:</i>		
	<input type="checkbox"/> Order of Saint Queen Tamar <i>at the grade of:</i>		
	<input type="checkbox"/> Order of the Crown of Georgia <i>at the grade of:</i>		
	<input type="checkbox"/> Medal of Merit of the Royal House of Georgia		
Do you hold a title or titles of nobility from the Royal House of Georgia?	<input type="checkbox"/> Yes <input type="checkbox"/> No	What title(s)? <i>Include evidence</i>	
Do you hold any other title or titles of nobility? <i>Only honors bestowed by the Royal House of Georgia are included in our Letters Patent.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	What title(s)? Bestowed by whom?	
Are you the recipient of any honors from the Georgian state?	<input type="checkbox"/> Yes <input type="checkbox"/> No	What honors?	

4. Details of Existing Heraldic Emblems

Blazon of Coat of Arms <i>As applicable</i>	
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Blazon of Crest <i>As applicable</i>	
Blazon of Supporters <i>As applicable</i>	
External additaments <i>Such as coronets of rank, objects borne behind the arms; etc. As applicable</i>	
Motto <i>As applicable</i>	
Blazon of Heraldic Badge <i>As applicable</i>	
Blazon of Flags <i>As applicable</i>	
Symbolism of your Heraldic Emblems	
Additional Information <i>you would like us to know about your arms</i>	

5. For Registrations Only				
Either	Granting or Matriculating authority		Date of Grant or Matriculation	
Or	Evidence of long-term family use of your arms			

6. Consent and Signature			
<p>Please confirm that all of the information on this form is correct to the best of your knowledge, and that you agree to provide any updated information as necessary</p>			<input type="checkbox"/> I confirm
<p>We may publish your arms and their registration number on our website and social media accounts. May we include your name alongside your arms?</p>			<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>I understand and acknowledge by signing below that:</p>	<p>The approval of my petition is subject to the recommendation of the Herald Master of Arms and to the discretion of the Head of the Royal House of Georgia.</p> <p style="text-align: center;">AND</p> <p>The Royal Heraldic College of Georgia has the discretion to recommend to the Head of the Royal House of Georgia the revocation of any heraldic emblems granted or registered to me if I make a false, misleading or incomplete statement in this petition, and if I should do the same at any other time during the grant or registration process.</p> <p style="text-align: center;">AND</p> <p>I acknowledge that my name will be included in my grant or registration of armorial bearings. I understand that the information included in my grant or registration document and accompanying symbolism & other applicable information will be kept on file with the Royal Heraldic College of Georgia and will be included in the <i>Register of Arms of the Royal Heraldic College of Georgia</i>.</p>		
<p>Signature</p>		<p>Date</p>	

FORM UPDATED 07 JULY 2025