

PLEASE PRINT



FOURTH DEGREE MEMBERSHIP DOCUMENT
KNIGHTS OF COLUMBUS

A SOCIETY OF CATHOLIC MEN

PRINTED
IN
U.S.A.

4 12/14

1	LAST NAME	FIRST NAME	MIDDLE INITIAL	TITLE	
	STREET	CITY	ST / PROV	POSTAL CODE / COUNTRY	
	HOME PHONE	DATE OF BIRTH	MARITAL STATUS	1st DEGREE DATE	COUNCIL NO.

2	CITIZEN OF WHAT COUNTRY?	BY BIRTH OR NATURALIZATION?	IF NATURALIZATION HAVE FINAL PAPERS BEEN RECEIVED?	YES	NO
	IF YOU WERE PREVIOUSLY INITIATED IN THE FOURTH DEGREE, GIVE:		ASSEMBLY NUMBER	CITY	ST/PROV.
3	DATE OF INITIATION	TERMINATION			
	REASON FOR TERMINATION				

4	PARISH	NEW OR PRESENT	NUMBER	CITY	ST/PROV
	I HEREBY DECLARE THAT THE ABOVE IS TRUE AND CORRECT AND THAT I AM A PRACTICAL CATHOLIC IN COMMUNION WITH THE HOLY SEE.	FORMER			

5	I CERTIFY THAT THE APPLICANT IS A THIRD DEGREE MEMBER IN GOOD STANDING				
	IN _____ COUNCIL NO. _____ LOCATION _____				
	DATE _____ SIGNATURE OF FINANCIAL SECRETARY _____				
	PROPOSER MEMBER NUMBER (REQUIRED) _____				

MEMBERSHIP NUMBER

NEW MEMBER

RESTORATION

TRANSFER

HONORARY MEMBERSHIP

HONORARY LIFE MEMBERSHIP

DATA CHANGE

SUSPENSION _____ reason _____

DEATH _____ mo day yr _____

5	FAITHFUL NAVIGATOR _____ DATE _____
	FAITHFUL COMPROLLER _____ DATE _____

RECEIVED FEES OF \$ _____ DATE _____
APPLICANT INITIATED AT _____ DATE _____
Signature of Master (required for new members only) _____

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5	SIGNATURE OF APPLICANT	DATE
	SIGNATURE OF PROPOSER	ASSEMBLY
	PROPOSER MEMBER NUMBER (REQUIRED)	

ASSEMBLY	NUMBER	CITY	ST/PROV
I CERTIFY THAT THE APPLICANT IS A THIRD DEGREE MEMBER IN GOOD STANDING			
IN _____		COUNCIL NO.	LOCATION
_____		DATE	SIGNATURE OF FINANCIAL SECRETARY

MEMBERSHIP NUMBER

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	DATE _____ SIGNATURE OF FINANCIAL SECRETARY _____				
	PROPOSER MEMBER NUMBER (REQUIRED) _____				

MEMBERSHIP NUMBER

NEW MEMBER
 RESTORATION
 TRANSFER
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 HONORARY LIFE MEMBERSHIP
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 SUSPENSION _____ reason _____
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	FAITHFUL COMPROLLER _____ DATE _____

RECEIVED FEES OF \$ _____ DATE _____
APPLICANT INITIATED AT _____ DATE _____
Signature of Master (required for new members only) _____

Financial Secretary Copy

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3	INITIATION	TERMINATION	ASSEMBLY NUMBER	CITY	ST/PROV.
	DATE OF				

REASON FOR TERMINATION

PARISH

I HEREBY DECLARE THAT THE ABOVE IS TRUE AND CORRECT AND THAT I AM A PRACTICAL CATHOLIC IN COMMUNION WITH THE HOLY SEE.

SIGNATURE OF APPLICANT _____ DATE _____

SIGNATURE OF PROPOSER _____ ASSEMBLY _____

PROPOSER MEMBER NUMBER (REQUIRED) _____

5 FAITHFUL NAVIGATOR _____ DATE _____

FAITHFUL COMPROLLER _____ DATE _____

ASSEMBLY	NUMBER	CITY	ST/PROV
NEW OR PRESENT			
FORMER			

I CERTIFY THAT THE APPLICANT IS A THIRD DEGREE MEMBER IN GOOD STANDING

IN _____ COUNCIL NO. _____ LOCATION _____

DATE _____ SIGNATURE OF FINANCIAL SECRETARY _____

MEMBERSHIP NUMBER

- NEW MEMBER
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