



# Fourth Degree Membership Document

KNIGHTS OF COLUMBUS – A SOCIETY OF CATHOLIC MEN

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

3	IF YOU WERE PREVIOUSLY INITIATED IN THE FOURTH DEGREE, GIVE:		ASSEMBLY NUMBER	CITY	ST/PROV.
	INITIATION	TERMINATION			
	DATE OF				
	REASON FOR TERMINATION				

	ASSEMBLY	NUMBER	CITY	ST/PROV
	NEW OR PRESENT			
	FORMER			

4	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)	

I CERTIFY THAT THE APPLICANT IS A THIRD DEGREE MEMBER IN GOOD STANDING IN	
COUNCIL NO.	LOCATION
DATE	SIGNATURE OF FINANCIAL SECRETARY

5	FAITHFUL NAVIGATOR	DATE
	FAITHFUL COMPTROLLER	DATE

RECEIVED FEES OF \$	DATE
APPLICANT INITIATED AT	DATE
SIGNATURE OF MASTER (REQUIRED FOR NEW MEMBERS ONLY)	

MEMBERSHIP NUMBER	_____
<input type="checkbox"/> NEW MEMBER	
<input type="checkbox"/> RESTORATION	
<input type="checkbox"/> TRANSFER	
<input type="checkbox"/> HONORARY MEMBERSHIP	
<input type="checkbox"/> HONORARY LIFE MEMBERSHIP	
<input type="checkbox"/> DATA CHANGE	
<input type="checkbox"/> SUSPENSION	_____ reason _____
<input type="checkbox"/> DEATH	_____ mo day yr _____

**SUPREME SECRETARY COPY**