



FOURTH DEGREE MEMBERSHIP DOCUMENT
KNIGHTS OF COLUMBUS
 A SOCIETY OF CATHOLIC MEN

PRINTED
IN
U.S.A.

4 12/14

MEMBERSHIP
NUMBER

- NEW MEMBER
- RESTORATION
- TRANSFER
- HONORARY MEMBERSHIP
- HONORARY LIFE MEMBERSHIP
- DATA CHANGE
- SUSPENSION _____ reason _____
- DEATH _____ mo _____ day _____ yr _____

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:		INITIATION		TERMINATION		ASSEMBLY NUMBER		CITY	ST/PROV.
3	DATE OF									
	REASON FOR TERMINATION			ASSEMBLY		NUMBER		CITY		ST/PROV
4	PARISH			NEW OR PRESENT						
	I HEREBY DECLARE THAT THE ABOVE IS TRUE AND CORRECT AND THAT I AM A PRACTICAL CATHOLIC IN COMMUNION WITH THE HOLY SEE.			FORMER						
	SIGNATURE OF APPLICANT			DATE						
SIGNATURE OF PROPOSER			ASSEMBLY							7
PROPOSER MEMBER NUMBER (REQUIRED)										
										8
5			FAITHFUL NAVIGATOR _____ DATE _____							8
			FAITHFUL COMPTROLLER _____ DATE _____							
										8

RECEIVED FEES OF \$ _____ DATE _____
 APPLICANT INITIATED AT _____ DATE _____

Signature of Master (required for new members only)

District Master Copy



FOURTH DEGREE MEMBERSHIP DOCUMENT
KNIGHTS OF COLUMBUS
 A SOCIETY OF CATHOLIC MEN

PRINTED IN U.S.A.

4 12/14

MEMBERSHIP NUMBER

- NEW MEMBER
- RESTORATION
- TRANSFER
- HONORARY MEMBERSHIP
- HONORARY LIFE MEMBERSHIP
- DATA CHANGE
- SUSPENSION _____ reason _____
- DEATH _____ mo _____ day _____ yr _____

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		ASSEMBLY NUMBER		CITY		ST/PROV.	
	REASON FOR TERMINATION			ASSEMBLY NUMBER		CITY		ST/PROV.	
4	PARISH			NEW OR PRESENT					
	I HEREBY DECLARE THAT THE ABOVE IS TRUE AND CORRECT AND THAT I AM A PRACTICAL CATHOLIC IN COMMUNION WITH THE HOLY SEE.			FORMER					
	SIGNATURE OF APPLICANT			DATE		I CERTIFY THAT THE APPLICANT IS A THIRD DEGREE MEMBER IN GOOD STANDING			
SIGNATURE OF PROPOSER			ASSEMBLY		IN _____		COUNCIL NO. _____ LOCATION _____		
PROPOSER MEMBER NUMBER (REQUIRED)					DATE _____		SIGNATURE OF FINANCIAL SECRETARY _____		
5	FAITHFUL NAVIGATOR _____			DATE _____		RECEIVED FEES OF \$ _____		DATE _____	
	FAITHFUL COMPTROLLER _____			DATE _____		APPLICANT INITIATED AT _____		DATE _____	
							Signature of Master (required for new members only)		

Financial Secretary Copy



FOURTH DEGREE MEMBERSHIP DOCUMENT
KNIGHTS OF COLUMBUS
 A SOCIETY OF CATHOLIC MEN

PRINTED IN U.S.A.

4 12/14

MEMBERSHIP NUMBER

- NEW MEMBER
- RESTORATION
- TRANSFER
- HONORARY MEMBERSHIP
- HONORARY LIFE MEMBERSHIP
- DATA CHANGE
- SUSPENSION _____ reason _____
- DEATH _____ mo _____ day _____ yr _____

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:		INITIATION		TERMINATION		ASSEMBLY NUMBER		CITY	ST/PROV.
3	DATE OF									
	REASON FOR TERMINATION			ASSEMBLY		NUMBER		CITY		ST/PROV
4	PARISH			NEW OR PRESENT						
	I HEREBY DECLARE THAT THE ABOVE IS TRUE AND CORRECT AND THAT I AM A PRACTICAL CATHOLIC IN COMMUNION WITH THE HOLY SEE.			FORMER						
	SIGNATURE OF APPLICANT			DATE						
SIGNATURE OF PROPOSER			ASSEMBLY							7
PROPOSER MEMBER NUMBER (REQUIRED)										
										8
5			FAITHFUL NAVIGATOR _____ DATE _____							8
			FAITHFUL COMPTROLLER _____ DATE _____							
										8

RECEIVED FEES OF \$ _____ DATE _____
 APPLICANT INITIATED AT _____ DATE _____

Signature of Master (required for new members only)

Faithful Comptroller Copy