



Knights On Bikes



State of Florida - Membership Application

eMail to: konbflmembership@gmail.com and KonBFLPresident@gmail.com

Full Name: _____ Sir Knight? Yes ____/ No ____ Full

Address (NO P.O. Boxes:) _____

City: _____ State: FL Postal Code: _____

Mobile Phone (Primary Contact): _____ Home Phone: _____

Email: _____ Work Phone: _____

Diocese: _____ Parish: _____

Knights on Bikes Proposer Name: _____

Knights on Bikes Proposer Phone Number: _____

Signature _____

Date _____

Describe your involvement with your parish and your council: _____

Knights of Columbus Information:

Traveling/Membership Card Number: _____ Degree: _____ Council # _____

Date Admitted to the KofC: _____ Council Name: _____

Council Contact Person & Phone #: _____

Assembly Name and Assembly #: _____

Assembly Contact Person & Phone #: _____

You MUST send photocopies of your current KofC Membership Cards (front & back) for verification of your membership status!!

ATTESTATION

I, _____, Attest and Affirm that I am a Knights of Columbus IN GOOD STANDING, and that I AM PROPERLY and FULLY LICENSED (**attach copy**) to OPERATE a MOTORCYCLE; that I am TRAINED/SKILLED in such operation of ANY motorcycle I will use while riding as a Knight on Bike (KonB), whether or not I am wearing Knights of Columbus patches/attire; and I hereby RELEASE and HOLD HARMLESS The Holy Catholic Church, The Knights of Columbus, and/or The Knights on Bikes, either in whole, as a group, or individually, from ANY adverse action, injury, or loss, to myself, or to others, that may have been caused directly, or indirectly by me, or ANY OTHER participant in a Knights on Bikes, Knights of Columbus and/or Holy Catholic Church function; or ANY OTHER function I participate in involving the use of motorcycles. I further attest that I have the proper insurance (**attach copy of insurance card**) and will maintain this insurance for as long as a I participated in the Knights on Bikes. Following membership and candidacy period approval, I may purchase KonB patches with the understanding and acceptance that the Diocese Crest and Gold Cross are the property of the Knights on Bikes and must be returned {without reimbursement} upon written request by the Diocese Chairman or National President.

Signature: _____

Date: _____



