



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

PRINTED
IN
U.S.A.

4 7/11

MEMBERSHIP
NUMBER

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

6

1

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

2

CITIZEN OF WHAT COUNTRY?	BY BIRTH OR NATURALIZATION? Birth Natural-ization	IF NATURALIZATION HAVE FINAL PAPERS BEEN RECEIVED?	YES	NO
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3

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

4

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

5

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

7

8



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REASON FOR TERMINATION

ASSEMBLY	NUMBER	CITY	ST/PROV
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PARISH

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AND THAT I AM A PRACTICAL CATHOLIC IN COMMUNION
WITH THE HOLY SEE.

NEW OR PRESENT		
-------------------	--	--

FORMER		
--------	--	--

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)

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Master Copy



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ASSEMBLY				
PROPOSER MEMBER NUMBER (REQUIRED)				

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FAITHFUL COMPTROLLER _____	APPLICANT INITIATED AT _____	DATE _____
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Assembly Copy