

Fourth Degree Membership Document - Form 4

The required areas for an Applicant for the Fourth Degree are shown below. Please note that the form has been changed by Supreme - they are purple and fields have changed. OLD FORMS WILL NOT BE ACCEPTED.

Section 1 & 2 - Completed by the New Member Applicant for the Fourth Degree. Council number & 1st degree date are required. Council Financial Secretary can advise of 1st degree date if not known.

Section 3 - Completed by the Applicant, if applicable.

Section 4 - Signature of Applicant and Date; Signature of Proposer and his Assembly Number; Proposer Membership number.

Section 5 - Signature of Faithful Navigator and Faithful Comptroller of the Assembly that the candidate will be joining.

Section 6 - Enter the Applicant's Membership Number and check New Member box; Enter Assembly Number and City & State of the Assembly being joined.

Section 7 - Financial Secretary enters Council Number and location. Financial Secretary signs, certifying that the Applicant is a 3rd Degree member in good standing.

Section 8 - Completed by District Master after the Exemplification.

Bill Schmidt
Master, Kentucky District

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

MEMBERSHIP NUMBER: 12345678

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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 DATE OF INITIATION TERMINATION ASSEMBLY NUMBER CITY ST/PROV. REASON FOR TERMINATION

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 MEMBERSHIP NUMBER (REQUIRED)

5 FAITHFUL NAVIGATOR DATE
FAITHFUL COMPTROLLER DATE

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

7 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

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

(Signature of Master (required for new members only))