

FR. PETER KERALUM KNIGHTS OF COLUMBUS COUNCIL 2785

MEMBERSHIP APPLICATION	(pg 1 of 2	2): New MemberTransfer-in Reapplication Member #
First name	MI	Last Name
Street address	Cit	y, State & zip code
Birthdate: MM/DD/YYYY	<u>//</u>	
HAVE YOU EVER BEEN A ME If a transfer-in member provide ye	MBER O	N UNION WITH THE HOLY SEE? Yes No OF THE KNIGHTS OF COLUMBUS? Yes No pership number above and previous council #
Knights of Columbus and any of	f its coun	correct and that I will uphold the charter, constitution and laws of the cils in which I hold membership and agree that the decision of the ers. I agree that the Knights of Columbus may verify the information
Signature of applicant & date sign	ned	
	s for mem	BADGE AND CONTACT INFORMATION obers and spouses. Nick names are encouraged. s are also available upon request.
Member name for badge		
Spouse's first name for her badge	, if applic	able
Cell phone #		_
2 nd Phone (not required)		(Home, Cell, Business)
Email:		
Space for admission committee: Recruiting member name and men Date approved for membership	nbership or due by	#

Approval notes and signature(s):



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We ask prospective new and transfer-in members to provide the following profile information. With your permission we will publish your member profile information in one of our Council's monthly newsletters using these eight "interview" questions. You are encouraged to provide your own written answers to these "interview" questions or briefly answer them below in the space provided. The admission committee or our newsletter editor will contact you for additional information if needed.

Where were you born and raised, and do you have any siblings?

Would you describe your career and your current employer and occupation?

Did you serve in the military? (If yes indicate when, branch, and where)

What is your educational background?

Why did you join the Knights? (Please list any previous council memberships or officer positions)

What are your hobbies and interests? (Especially those that may help serve the council and parish.)

What is your marital status? (If applicable provide anniversary date and names of any children.)

When did you become a Catholic? (Indicate what parish you are registered in now.)

After completing this application, please return it to our Membership Director (or, if applicable, the member who recruited you). His contact information may be found at our council web site <u>www.kofc2785.org</u> which we have designed to provide council and membership information to current and prospective members. We suggest you make a copy your completed application for your records.