

Membership Document

A CATHOLIC, FAMILY, FRATERNAL, SERVICE ORGANIZATION

1	COUNCIL NUMBER			COUNCIL L	OCATION (CITY, ST/PROV)	M	EMBERSHIP NUMBER	DATE RE	EAD	DATE ELECTED	1ST. DEG. I	DATE
	TRANSACT	ION			REACTIVATION (inactive insur	rance)	☐ TRANSFER IN			☐ DATA CHANGE		
	□ NEW MEMBE	R		_	DEADMICCION (*** 4 - 7 · · · · · · ·		☐ HONORARY MEMBE			SUSPENSION_	reaso	n
2	☐ JUVENILE TO	ADULT	Г		READMISSION (up to 7 years)			· ·	e attained			
	☐ REINSTATEMENT (up to 3 months) ☐ REAPPLICATION (over 7 years)					s)	☐ HONORARY LIFE MI		gree attained			
3												
	*ARE YOU A PRACTICAL CATHOLIC IN COMMUNION WITH THE HOLY SEE?	YES	NO		PARISH NA	AME, LOCAT	ION (CITY, ST/PROV)			FORMER COLUMBIAN SQUIRE?	YES	NO
4	DID YOU APPLY FOR MEMBERSHIP	YES	NO	INITIATION DATES	1. FIRST		2. SECOND	3.	THIRD	4	. FOURTH	
7	PREVIOUSLY? DATE OF TERMINATION		REASO	N			NUMBER OF LAST COUNCIL	COLINCII	LOCATION (CIT	V ST/PROW		
	DATE OF TENININATION		TILMOO	•			NOMBERTON END GOONGE	OGGIVOIL	LOOATION (OII	1, 01/1 1104)		
5												
	I HEREBY RECOMMEND	THE ARO	VE ADDI I	CANT FOR MEN	BEDSHID		I HEREBY DECLARE THAT TH	IE AROVE IS TRUE	AND CORRE	CT AND THAT I WILL III	BUOLD THE	CHARTER
	PRINTED NAME	THEADO	VEALL	JANT I ON WEW	BENOTIF.		CONSTITUTION AND LAWS OF MEMBERSHIP AND AGREE THA I AGREE THAT THE KNIGHTS OF	F THE KNIGHTS OF T THE DECISION OF	THE BOARD O	AND ANY OF ITS COUNC F DIRECTORS SHALL CON	CILS IN WHIC ITROL IN ALL	CH I HOLD MATTERS.
6	OF PROPOSER						MY CORRECT ADDRESS.	COLOWIDOS WAT OF	SE AN OUTSIDE	AGENOT TO OBTAIN INTO	TIMATION CO	INCELLIALING
Ů	PROPOSER'S MEMBER	ROPOSER'S MEMBER NUMBER (required)						SIGNAT	TURE OF APPLI	CANT		
	DATE				FINANCIAL SECRETARY		SIGNATURES			GRAND KNIGHT		
		F	AMILY	INFORMAT	ION		COMPLET	E WHEN REPO	ORTING ME	MBER DEATH ON	LY.	
WIE	FE'S NAME					NEX	T OF KIN					
NA	MES AND AGES O	F CHIL	DREN_			REL	ATIONSHIP					
						STR	EET					
						CIT						
_						ST/I	PROV		PO:	STAL CODE		
	PPLICANT'S											
Fo	ollowing subm Imission com	nissio mitt <i>e</i>	n of	this Me	mbership Document, y ne committee in prep	you w	ill be contacted in In for this meeting	n regard to	your n	neeting with t	the cou	ıncil's nittee
as	signment pre	feren	ces k	elow. If	you need more specific	c infor	mation on any of	these com	mittees	, please inqui	re durir	ng the
l	erview proces	SS.				~			UNCIL			
│ □ CHURCH □ COMMUNITY □ YOUTH				ı		_		HIP RECRUITM	ENT/			
Ple	ease specify i	nteres	sts:					RE	ETENTIO	V		
				vour me	mbership in the Knights	s of Co	olumbus?					
ln	In your opinion, what can you do or contribute to assist in the successful operation of this council?											
Da	Date of Interview: Signed:											
عرا ا					UITY APP(S) TO GENERAL A							

ANNUITY APPLICATION FOR NEW MEMBERS

Knights of Columbus, A Fraternal Benefit Society, 1 Columbus Plaza, New Haven, CT 06510-3326

INFORMATION CONCERNING APPLIC	CANT	8. Will this annuity replace, in whole or in part, any existing				
1. Name of Applicant (last-first-middle	e initial)	insurance or annuity now	in force? Ye	s 🗌 No 🗌		
NEODWATION CONCEDNING ANNUAL	TANIT	If yes, provide the follow	ng information	on regarding the cont	tract	
INFORMATION CONCERNING ANNUI		to be replaced.				
2. Name (last-first-middle initial)	Sex	Company	Vear	ssued Amount		
3. Street	I	Сотрану	Tour	Journal Parison		
A Other Other (Burnings	7:- 0-d-/D-d-10-d-					
4. City State/Province	Zip Code/Postal Code	INFORMATION CONCERT	JING BENEE	ICIADV		
5. Relationship to Applicant	Age	9. Name		elationship to Annuitant		
The state of the s	3			•		
6. Social Security Number/Social Insurance Number	Date of Birth	10. Social Security Number/Social Date Insurance Number		Date of Birth	e of Birth	
REGARDING MY APPLICATION	N FOR A KNIGHTS OF	COLUMBUS ANNUITY	CONTRAC	T. I UNDERSTAND):	
 The long range nature of the an While the Board of Directors wi specifically guaranteed at the ti discretion of the Board of Directors 	nuity being purchased. Il always strive to main me of issue of this con	tain competitive interest ra	ates, any int	erest rates not		
 A surrender charge ranging fror within seven years of deposit, v years. After the first contract ye of it once each year with no sur my age at the time of withdraws 	m 5% to 2% will be imposite no surrender charge ar, if the Accumulation render charge. If a surr	e being made against am Value is \$5,000 or more, l	ounts on de may withd	posit over seven aw as much as 10	%	
 (a) In the <u>United States</u>: Interest penalty is imposed by the IRS of Revenue Service penalty will not the life of the taxpayer.) 	t credited to this contra	drawn before the taxpaye	r is age 59 1	∕₂. (This Internal		

- (b) In <u>Canada</u>: Interest credited to this contract is reportable on an annual basis, even if there is no distribution.
- 5. The annuity applied for will be cancelled if the applicant is a candidate for membership and has not been initiated into the First Degree of the Order within 90 days of the date of this application.

Applicant's Signature	Date
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A CATHOLIC, FAMILY, FRATERNAL, SERVICE ORGANIZATION

1	COUNCIL NUMBER			COUNCIL I	OCATION (CITY, ST/PROV)		MEMBERSHIP NUMBER		DATE READ	DATE ELECTED	1ST. DEG. I	DATE
Ė	TRANSACT	ION			REACTIVATION (inactive in	nsurance)	☐ TRANSFER IN			☐ DATA CHANGE		
	□ NEW MEMBE			_	DEADMICCION (*** 4- 7 ***		☐ HONORARY MEMBE	ERSHIP_		SUSPENSION_	reaso	n
2	☐ JUVENILE TO	ADUL	Г	L	READMISSION (up to 7 ye	ars)	☐ HONORARY LIFE M	EMPED	degree attained			
	☐ REINSTATEMENT (up to 3 months) ☐ REAPPLICATION (over 7 years)					HONORARY LIFE W	EIVIDEN	degree attained				
3												
	*ARE YOU A PRACTICAL	YES	NO		PARIS	SH NAME, LOCA	ATION (CITY, ST/PROV)			FORMER	YES	NO
	CATHOLIC IN COMMUNION WITH THE HOLY SEE?									COLUMBIAN SQUIRE?		
4	DID YOU APPLY FOR MEMBERSHIP	YES	NO	INITIATION DATES	1. FIRST		2. SECOND		3. THIRD	4	FOURTH	
-	PREVIOUSLY? DATE OF TERMINATION		REASO	N			NUMBER OF LAST COUNCIL	C	COUNCIL LOCATION (CIT	Y, ST/PROV)		
5												
	I HEREBY RECOMMEND	THE ABO	VE APPLI	CANT FOR MEN	BERSHIP.		I HEREBY DECLARE THAT THE CONSTITUTION AND LAWS OF	HE ABOVE	IS TRUE AND CORRECT	CT AND THAT I WILL UP AND ANY OF ITS COUNC	PHOLD THE	CHARTER,
	PRINTED NAME OF PROPOSER						MEMBERSHIP AND AGREE THAT I AGREE THAT THE KNIGHTS OF MY CORRECT ADDRESS.	AT THE DEC	ISION OF THE BOARD OF	F DIRECTORS SHALL CON	TROL IN ALL	MATTERS.
6	PROPOSER'S MEMBER NUMBER (required)								SIGNATURE OF APPLIC	CANT		
	DATE		A BAILL V	INFORMAT	FINANCIAL SECRETARY		SIGNATURES	E WHEN	I DEDORTING ME	GRAND KNIGHT	V	
WIE	E'S NAME		AIVIILT	INFORMA	ION	NE	XT OF KIN	E WHEN	I REPORTING IVIE	.WIDEN DEATH ON		
	MES AND AGES O	F CHIL	DREN			RE	LATIONSHIP					
						ST	REET					
_						CIT						
						ST	/PROV		PO:	STAL CODE		
	PPLICANT'S											
Fo	llowing subn	nissic	n of	this Me	mbership Documen ne committee in pr	t, you w	vill be contacted in	n rega	ard to your m	neeting with t	he cou	incil's
as	signment pre	feren	ces b	elow. If	you need more spec	cific info	rmation on any of	these	committees	, please inquir	e durir	ig the
	erview proce	SS.			□ COMMUI	NITY		Г	COUNCIL			
☐ FAMILY ☐ YOUTH						MEMBERS	HIP RECRUITM	ENT/				
Ple	ease specify i	ntere	sts:_						RETENTION	V 		
W	hat do you ex	pect ·	from	your me	mbership in the Knig	hts of C	olumbus?					
_												
In	In your opinion, what can you do or contribute to assist in the successful operation of this council?											
Da	ate of Interviev	N:				Signed	d:					
							RAL AGENT		ADMISSION COMMITTE	E CHAIRMAN		_

ANNUITY APPLICATION FOR NEW MEMBER'S SPOUSE

Knights of Columbus, A Fraternal Benefit Society, 1 Columbus Plaza, New Haven, CT 06510-3326

INF	ORMATION CONCERNING APPLICA	ANT	8. Will this annuity replace, in whole or in part, any existing			
1.	Name of Applicant (last-first-middle	initial)	insurance or annuity now i	n force? Ye	es 🗌 No	0 🗌
			If yes, provide the following	g information	on regardi	ng the contrac
INF	ORMATION CONCERNING ANNUITA	ANT	to be replaced.			
2.	Name (last-first-middle initial)	Sex				
_			Company	Year	Issued	Amount
3.	Street					
4.	City State/Province	Zip Code/Postal Code				
			INFORMATION CONCERN	ING BENEF	ICIARY	
5.	Relationship to Applicant	Age	9. Name	Relati	ionship to	Annuitant
6.	Social Security Number/Social Insurance Number	Date of Birth	10. Social Security Number Insurance Number	r/Social	Date	e of Birth
1. 2.	The long range nature of the ann While the Board of Directors will specifically guaranteed at the tin	always strive to maint ne of issue of this con	tain competitive interest ra			
3.	discretion of the Board of Director A surrender charge ranging from within seven years of deposit, with years. After the first contract year of it once each year with no surrounding age at the time of withdrawa	15% to 2% will be imp ith no surrender charg ar, if the Accumulation ender charge. If a surr	e being made against amo Value is \$5,000 or more, I	unts on de may withd	eposit over	er seven uch as 10%
4.	(a) In the <u>United States</u> : Interest penalty is imposed by the IRS or Revenue Service penalty will not the life of the taxpayer.)	credited to this contra n taxable income with t be assessed if the ta	drawn before the taxpayer xable income is disbursed	is age 59 1 in periodic	½. (This Iı paymen	nternal ts made for
5.	(b) In <u>Canada</u> : Interest credited to The annuity applied for will be cale into the First Degree of the Orde	ancelled if the applicar	nt is a candidate for memb			
Ap	plicant's Signature		Annuitant's Signature			

Date

Date



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A CATHOLIC, FAMILY, FRATERNAL, SERVICE ORGANIZATION

	COUNCIL NUMBER COUNT	CIL LOCATION (CITY, ST/PROV)	MEMBERSHIP NUMBER	DATE READ	DATE ELECTED	1ST. DEG. DA	TE .		
							,		
	TRANSACTION NEW MEMBER	☐ REACTIVATION (inactive insurance)	☐ TRANSFER IN		□ DATA CHANGE□ SUSPENSION				
2	☐ JUVENILE TO ADULT	☐ READMISSION (up to 7 years)	☐ HONORARY MEMBEI	RSHIP	_ SOSPENSION	reason			
	☐ REINSTATEMENT (up to 3 months)	☐ REAPPLICATION (over 7 years)	☐ HONORARY LIFE ME	MBERSHIP					
3									
3									
	*ARE YOU A PRACTICAL YES NO CATHOLIC IN COMMUNION	PARISH NAME, LOCA	ATION (CITY, ST/PROV)		FORMER COLUMBIAN	YES	NO		
	WITH THE HOLY SEE? DID YOU APPLY YES NO INITIATION	NA 1. FIRST	2. SECOND	3. THIRD	SQUIRE?	FOURTH			
4	FOR MEMBERSHIP PREVIOUSLY? DATES								
	DATE OF TERMINATION REASON		NUMBER OF LAST COUNCIL	COUNCIL LOCATION (CIT	TY, ST/PROV)				
5									
	I HEREBY RECOMMEND THE ABOVE APPLICANT FOR	MEMBERSHIP.	I HEREBY DECLARE THAT THE CONSTITUTION AND LAWS OF MEMBERSHIP AND AGREE THAT	ABOVE IS TRUE AND CORRETHE KNIGHTS OF COLUMBUS	ECT AND THAT I WILL UP AND ANY OF ITS COUNCIL DE DIRECTORS SHALL CONT	HOLD THE CH	HARTER, I HOLD		
	PRINTED NAME OF PROPOSER		I AGREE THAT THE KNIGHTS OF C MY CORRECT ADDRESS.	COLUMBUS MAY USE AN OUTSIDE	E AGENCY TO OBTAIN INFOR	MATION CONC	ERNING		
6	PROPOSER'S MEMBER NUMBER (required)			SIGNATURE OF APPL	ICANT				
	DATE	FINANCIAL OFORFTARY	OLONATUREO		ODAND KANOLIT				
	FAMILY INFORM	FINANCIAL SECRETARY MATION	SIGNATURES	WHEN REPORTING MI	GRAND KNIGHT	<i>(</i> .			
WII	FE'S NAME		XT OF KIN						
NA	MES AND AGES OF CHILDREN	RE	LATIONSHIP						
		ST	REET						
		CI1							
		ST	/PROV	P0	STAL CODE				
AF	PPLICANT'S INTERESTS/PR	REFERENCES							
Fo	ollowing submission of this Marketing Submission committee To aid	Membership Document, you w the committee in preparation	vill be contacted in	regard to your r	neeting with th	ne cour	ncil's		
as	signment preferences below.	. If you need more specific info	rmation on any of t	hese committees	s, please inquire	e during	the		
	erview process.								
	CHURCH FAMILY	☐ COMMUNITY ☐ YOUTH		□ COUNCIL□ MEMBERS	SHIP RECRUITME	ENT/			
Ple	ease specify interests:			RETENTIO	N				
\vdash	· · · ·	membership in the Knights of C	olumbus?						
	jou orpoot hom your f								
ln	your opinion, what can you d	o or contribute to assist in the s	successful operation	of this council?					
D-	Date of Interview: Signed:								
\ D8	ate of interview;	_	d:	ADMISSION COMMITTE	EE CHAIRMAN				
		RETAIN FOR CO	DUNCIL RECORDS						

WHY YOU SHOULD BE A KNIGHT OF COLUMBUS

- 1. As an integral part of the world's largest and most dynamic Catholic fraternal organization, you will be united with more than 1.7 million brother Knights and their families in over 13,000 local councils in the United States, Canada, Mexico, the Philippines, Poland, Central America and the Caribbean.
- 2. Your personal involvement as a Knight will provide opportunities, in charity and fraternity, for service to the Church at the local, diocesan and universal levels; to your communities; and to the less fortunate in our midst.
- 3. Your active participation in council affairs: spiritual, fraternal, family, social, civic-oriented, athletic and recreational will serve as a school of leadership and enable you to develop qualities that enhance your strengths and abilities.
- 4. You will enjoy a sense of "belonging" in an organization that shares your religious beliefs, brings together likeminded men joined in a common cause, and offers the opportunity to develop and cement friendships for years to come.
- 5. Your concerns for your family and for your retirement years can be addressed by the Order's low-cost insurance program, conducted by brother Knights for brother Knights, and assure **their** security and **your** peace of mind.
- 6. You will share in the sense of pride all Knights feel in knowing that their Order is second to none in support of our Holy Father, our bishops and priests; in working for our fellow man, especially those most in need; and in binding together to preserve traditional values in the face of attacks against the family and innocent human life.

WHY YOU AND YOUR WIFE SHOULD ACCEPT THIS "NEW MEMBER ANNUITY" OFFER

- 1. For as little as \$100 each, you and your wife can open an annuity.
- 2. Your principal is guaranteed by the Knights of Columbus.
- 3. The Board of Directors sets the interest rate for this plan, but at no time will it drop below 3%. All interest credited in the United States is tax deferred.
- 4. You may add deposits to your annuity at any time.
- 5. Everybody can use additional funds during their retirement.