MEMBERSHIP

	_						-	NUMBER	ALL A	
SAME.	LAST NAME	FIRST NAME	MIDDLE	INITIAL	in the second	E		□ NEW MEMBER □ RESTORATION		
1	STREET CITY		ST/PI	POSTAL COL	OSTAL CODE / COUNTRY		☐ TRANSFER			
	HOME PHONE	HONE DATE OF BIR		MARITAL STATUS S M		COUNCIL NO.		☐ HONORARY MEMBERSHIP ☐ HONORARY LIFE MEMBERSHIP		
2	CITIZEN OF WHAT COUNTRY?				AL PAPERS		DATA CHANGE  SUSPENSION			
3	IF YOU WERE PREVIOUSLY INITIATION  DATE OF					PROV.	DEATH mo day yr			
200	REASON FOR TERMINATION		ASSEMBLY					GITY ST/PI	ROV	
THE PERSON NAMED IN	PARISH		NEW OR PRESENT							
4	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  IN							
	SIGNATURE OF APPLICANT DATE		COUNC			ICIL NO. LOCATION				
	SIGNATURE OF PROPOSER	ASSEMBLY			DATE			SIGNATURE OF FINANCIAL SECRETARY		
	PROPOSER MEMBER NUMBER	REQUIRED)							7	
5	FAITHFUL NAVIGATOR			APPLICANT INITIATED AT		DATE				
	FAITHFUL COMPTROLLER		DATE							
					DATE			Signature of Master (required for new members only)		