7	Fourth D	egree N						nt		4 10/20
	LAST NAME	FIRST NAME		MIDDLE INIT		TITLE			MEMBERSHIP NUMBER  NEW MEMBER  RESTORATION	
1	STREET CITY ST/PROV POSTAL CO							E/COUNTRY TRANSFER		
	HOME PHONE	OME PHONE DATE OF BIRTH		ATUS 1st	1st DEGREE DATE		COUNCIL NO.		☐ HONORARY MEMBERSHIP ☐ HONORARY LIFE MEMBERSHIP	
2	CITIZEN OF WHAT COUNTRY?	EN OF WHAT COUNTRY?			IF NATURALIZAT HAVE FINAL PAR BEEN RECEIVED	PERS	YES	NO	☐ DATA CHANGE	6
3	INITIATION TERMINATION ASSEMBLY NUMBER CITY ST/PROV.								reason	
	REASON FOR TERMINATION		ASSEMBLY	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							
4			I CERTIFY THAT THE APPLICANT IS A THIRD DEGREE MEMBER IN GOOD STANDING IN							
	SIGNATURE OF APPLICANT DATE  SIGNATURE OF PROPOSER ASSEMBLY		COUNCIL NO.						LOCATION	7
	SIGNATURE OF PROPOSER  PROPOSER MEMBER NUMBER (R	DA	DATE SIGNAT					TURE OF FINANCIAL SECRETARY		
	FAITHFUL NAVIGATOR	_	DATE					DATEDATE	8	
5	FAITHFUL COMPTROLLER								SIGNATURE OF MASTER (REQUIRED FOR NEW MEMRERS ONLY)	

SUPREME SECRETARY COPY

SIGNATURE OF MASTER (REQUIRED FOR NEW MEMBERS ONLY)