



Membership Enrollment Form

☐ **Yes!** I am a baptized Catholic man over the age of 18 and a practicing Catholic. Please sign me up for e-membership in the Knights of Columbus at no cost for the first year (a \$30 value)!

First Name: _____ Last Name: _____

Email: _____ Cell Phone: (_____) _____

Street Address: _____

City: _____ State/Prov.: _____ Zip/Postal Code: _____

Parish: _____ Parish City, State: _____

Date of Birth: ____ / ____ / ____ Former Member? ____ Yes ____ No

Preferred Language: ____ English ____ Français ____ Español ____ Other: _____

Member Referral Number: _____

By signing below, I attest to the accuracy of all the information provided above.

Signature: _____ Date: ____ / ____ / ____

To complete your registration as an e-member, we will input the information you provided above into our online membership system. Once that is complete, you will need to confirm your membership by responding to an email that you will receive from the Knights of Columbus at the email address you listed above. If you do not respond to the registration email, a Knights of Columbus representative may reach out to you to help you complete the registration process.