

## NEW MEMBER FORM

### PERSONAL INFORMATION:

FIRST: \_\_\_\_\_ MIDDLE: \_\_\_\_\_ LAST: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

### CONTACT INFORMATION:

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

EMAIL: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

### CHAPTER INFORMATION:

CHAPTER NAME: \_\_\_\_\_ NUMBER: \_\_\_\_\_

MARK MASTER: \_\_\_\_\_

PAST MASTER: \_\_\_\_\_

MOST EXCELLENT MASTER: \_\_\_\_\_

ROYAL ARCH: \_\_\_\_\_

### COUNCIL INFORMATION:

COUNCIL NAME: \_\_\_\_\_ NUMBER: \_\_\_\_\_

ROYAL MASTER: \_\_\_\_\_

SELECT MASTER: \_\_\_\_\_

SUPER EXCELLENT MASTER: \_\_\_\_\_

### COMMANDERY INFORMATION:

COMMANDERY NAME: \_\_\_\_\_ NUMBER: \_\_\_\_\_

ORDER OF RED CROSS: \_\_\_\_\_

ORDER OF MALTA: \_\_\_\_\_

ORDER OF THE TEMPLE: \_\_\_\_\_

Life Sponsor Payment Enclosed (\$30, Made Payable to KTEF)

*\*New Sir Knights will not be added to the York Rite Database without the thirty-dollar (\$30.00) Life Sponsor payment for each*

### SUBMITTED BY:

SECRETARY/RECORDER NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_