



APPLICATION FOR MEMBERSHIP
ORDER OF KNIGHTS OF PYTHAGORAS

_____ COUNCIL, No. _____

_____ CITY STATE

Name _____

Residence _____

Date of Birth _____ Age _____

Schooling _____

Interrogations:

Do you believe in the existence of God? _____

Have you ever belonged to a youth Organization? _____

My parents or guardians approve of this application? _____

Applicant's Signature

Parent's Signature

Recommended:

By _____ Date _____

By _____ Date _____

Approved:

By _____ Date _____

By _____ Date _____