

Patron: Arch Bishop
 Rt. Rev. Dr. Mathew Moolakkatt
Spiritual Director: Rev.
 Fr. Abraham Mutholathu



5110 N. Elston Ave.
 Chicago, IL 60630
 (773) 736-7611
 A NOT FOR PROFIT
 ORGANIZATION

APPLICATION FOR MEMBERSHIP

NAME OF APPLICANT :			
FAMILY NAME :	<small>FIRST</small>		<small>LAST</small>
MAILING ADDRESS :			
	<small>No. and Street</small>		<small>Apt#</small>
PHONE NUMBER :	<small>CITY</small>	<small>STATE</small>	<small>ZIP CODE</small>
E-MAIL ADDRESS :			
PARISH IN INDIA :			
PARISH IN U.S.A. :			

IF MARRIED, IS YOUR SPOUSE A KNANAYITE? YES NO

NAME OF SPOUSE & NAME OF CHILDREN

	DATE OF BIRTH
<small>FIRST</small> _____ <small>LAST</small> _____	<small>MON</small> <small>DAY</small> <small>YEAR</small>
<small>FIRST</small> _____ <small>LAST</small> _____	<small>MON</small> <small>DAY</small> <small>YEAR</small>
<small>FIRST</small> _____ <small>LAST</small> _____	<small>MON</small> <small>DAY</small> <small>YEAR</small>
<small>FIRST</small> _____ <small>LAST</small> _____	<small>MON</small> <small>DAY</small> <small>YEAR</small>

I do hereby agree to abide by all the rules and regulations of the Knanaya Catholic Society of Chicago as per it's Constitution. I do understand that one has to be a practicing Knanaya Catholic to be eligible for membership in the Society. I also declare that I am a practicing Knanaya Catholic with the eligibility for membership in the Diocese of Kottayam. It shall be my responsibility to notify the K.C.S. Secretary, of any change in this given information or conditions. My membership in the society shall be terminated at any time when I shall not meet any of the conditions for membership as per it's constitution.

SIGNATURE OF APPLICANT: _____ DATE: _____

DECISION BY THE LAISON BOARD	: <input type="checkbox"/> Accepted	: <input type="checkbox"/> Rejected
NAME OF LAISON BOAED CHAIRMAN	:	
SIGNATURE OF LAISON BOARD CHAIRMAN:	_____	DATE: _____
SIGNATURE OF K.C.S. SECRETARY	_____	DATE: _____