



# **Austin Chapter Registration**

## **Knights of Columbus**

### **2017 - 2018**

My Council would like to participate in the Austin Chapter this Fraternal Year.

We have included our Fifty Dollar Payment for Annual Dues.

#### **Make Checks Payable & Mail to:**

Austin Chapter Knights of Columbus  
PO Box 303081  
Austin, Texas 78703

Council Number \_\_\_\_\_

District Number \_\_\_\_\_

Grand Knight or Faithful Navigator Name (Print) \_\_\_\_\_

Council Contact Information: Email: \_\_\_\_\_ Phone: \_\_\_\_\_

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**Grand Knight Signature**

**Date**

**The Grand Knight is the primary voting delegate for the Chapter.**

In addition to the Grand Knight each organization is authorized two additional voting delegates to represent your council/assembly. If you would like to designate additional voting delegates please provide the information below.

**Delegates must be third degree and present at the chapter meeting to vote.**

**Please Print the Name of your Voting Delegates**

Delegate 1 \_\_\_\_\_

Delegate 2 \_\_\_\_\_

**Please Return This Form With Your Check**