

Grand Commandery Knights Templar of Ohio

15607 Twp Rd 218
Van Buren OH 45889-9708

Date _____ 20_____

APPLICATION FOR ENDOWED LIFE MEMBERSHIP

I _____, am a member in good
(print name in full)

standing in _____ Commandery, K.T. No _____ within the
Grand Commandery Knights Templar of Ohio and hereby apply for an Endowed Life Membership
therein. Endowed Life Membership \$800.00

I am a KTEF Sponsor/Assoc. Patron/Patron in the above named Commandery Add \$0.00
Or if not a KTEF Life Sponsor/Assoc. Patron/Patron in the above Commandery Add \$30.00

I have enclosed a check for the cost payable to: Total Amount Enclosed \$_____

Grand Commandery Knights Templar of Ohio

(Applicants Signature)

(recipients address – no. and street)

(city and state) (zip code)

(area code) (phone no)

Send completed form with check to: Grand Recorder
15607 Twp. Rd. 218
Van Buren, OH 45889-9708

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GRAND COMMANDERY KNIGHTS TEMPLAR of OHIO

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Computer Updated _____ Certificate Filed _____ No. _____

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