Patron: Arch Bishop
Rt. Rev. Dr. Mathew Moolakatt
(Bishop of Arch Eparchy of Kottayam)
Spiritual Director:
Fr. Abraham Mutholathu

KCS
Knanaya Catholic Society

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

APPLICATION FOR MEMBERSHIP

NAME OF APPLICANT : _____
FIRST LAST

AGE & DATE OF BIRTH : _____
AGE MONTH DAY YEAR

FAMILY NAME : _____

MAILING ADDRESS : _____
NO. & STREET NAME APT/UNIT #

: _____
CITY STATE ZIP CODE

PHONE NUMBER : _____
HOME MOBILE/CELL

E-MAIL ADDRESS : _____

PARISH IN INDIA : _____

PARISH IN U.S.A. : _____

VISA STATUS : ☐ U.S. CITIZEN ☐ U.S. PERMANENT RESIDENT

RECOMEMENDED BY : **1** _____
FIRST LAST

_____
NO. & STREET NAME APT/UNIT #

_____
CITY STATE ZIP CODE

_____
PHONE HOME MOBILE/CELL

2 _____
FIRST LAST

_____
NO. & STREET NAME APT/UNIT #

_____
CITY STATE ZIP CODE

_____
PHONE HOME MOBILE/CELL

(RECOMMENDING PERSON SHOULD NOT BE THE RELATIVE OF THE APPLICANT)

IF MARRIED, IS YOUR SPOUSE A KNANAYITE? ☐ YES ……. ☐NO
* USE ONE FORM FOR ONE PERSON

I do hereby agree to abide by all the rules and regulations of the Knanaya Catholic Society of Chicago as per its 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 its constitution.

SIGNATURE OF APPLICANT_____ DATE: _____

FOR OFFICE USE ONLY

DECISION BY THE LAISON BOARD : ☐ ACCEPTED ☐ REJECTED
NAME OF LAISON BOARD CHAIRMAN : _____
SIGNATURE OF LAISON BOARD CHAIRMAN : _____ DATE: _____
SIGNATURE OF K.C.S. SECRETARY : _____ DATE: _____