

# Order of Knighthood

CHIVALRIC KNIGHTS

of the

HOLY ORDER of the FELLOW SOLDIERS of JACQUES DeMOLAY



To the Illustrious Knight Commander, and Knights:

I do hereby freely and voluntarily offer myself as a candidate for membership in the Chivalric Knights of the Holy Order of the Fellow Soldiers of Jacques DeMolay.

I pledge that I am a member in good standing of a duly recognized Chapter of the Order of DeMolay and that I am not under suspension or expulsion from my Chapter.

I personally pledge the following SERVICE to the PRIORY, into which I shall be initiated:

I shall participate to the best of my ability in whichever community or civic project the Officers of the Priory vote to sponsor, some of which will be totally unrelated to DeMolay.

I will commit to memory a part assigned to me of a DeMolay ceremony not usually included within the Chapters performance (such as Majority, Memorial, funeral, etc.) and will be on call from the Priory.

As time permits, I will be available to speak by invitation at any Masonic event on the merits and purpose of DeMolay, and to do this singularly or on Knighthood teams.

I pledge that I will keep the Executive Officer of my jurisdiction or his appointed personnel of Knighthood informed of any change of address and phone number. In this way I can be contacted on emergency calls for my SERVICE.

The above Pledge is given in appreciation to the Order of DeMolay, which has helped me mature in mind and character and I am willing to offer my service to my chapter, community, state and nation.

I furthermore pledge that I am of good character and between the ages of 17 and 21. I offer the following who have affixed their signatures as references.

\_\_\_\_\_  
Applicant's Signature

Recommended by:

\_\_\_\_\_  
Priory Advisor or Advisory Council

\_\_\_\_\_  
A Sir Knight of the Priory

\_\_\_\_\_  
A Sir Knight of the Priory

Investiture Life Membership Fee \$55.00

(Complete the Reverse Side)

# INFORMATION FOR THE SIR KNIGHT REGISTRAR

(Please Print the Following Information)

NAME \_\_\_\_\_  
(First) (Middle) (Last)

Date of Birth \_\_\_\_\_ Present Age \_\_\_\_\_

Chapter Name \_\_\_\_\_

Chapter Location \_\_\_\_\_  
(Address) (City)

How Long Have You Been a DeMolay? \_\_\_\_\_ Your DeMolay ID # \_\_\_\_\_

Chapter offices held \_\_\_\_\_

Committees served on \_\_\_\_\_

DeMolay Awards and Honors (Circle) **RD** **Chevalier** **Blue Honor Key**

Others \_\_\_\_\_

School or College Attending \_\_\_\_\_  
(Name) (Location)

AND/OR

Employed At \_\_\_\_\_  
(Company Name) (Address) (City)

**NOTE:** Print Plainly How You Want Your Mail Addressed

Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone ( ) \_\_\_\_\_ E-Mail \_\_\_\_\_

I certify upon my honor as a DeMolay that the above questions have been answered correctly.

\_\_\_\_\_  
Signature of Applicant

## REGISTRAR'S USE ONLY

Date Received \_\_\_\_\_ Paid Investiture Fee \_\_\_\_\_ Cash Check

Date Investiture Given \_\_\_\_\_ Purchased Ritual \_\_\_\_\_ Baldric \_\_\_\_\_