

Knight Emeritus Application

NAME		DATE
ADDRESS		
CITY	STATE	_ ZIP CODE
The above-named Knight voluntaril Emeritus. I attest that I am being ho Knights and that my wisdom and ex further attest that all information co	onored for my daperience will b	levotion to this association and the be used in an advisory position. I
To be placed as a Knight Emeritus,	one of the follo	owing must be met.
1. Must be a minimum of 70 years minimum of 10 years.	of age and hav	ve been an active Knight for a
2. Must meet the requirements of Article IX, Section 2.		
1. AGE DOB	DATE DUI -OR-	BBED
2. STATEMENT		
SIGNATURE		DATE