



APPLICATION FOR MEMBERSHIP

Order of the Scottish Knights of Saint Andrew

A & ASR, Valley of Denver, Orient of Colorado



Name: _____
(Remember, this is how it will appear on your name badge)

Address: _____

City, State, Zip: _____

Home Phone #: _____ Work Phone #: _____

Cell Phone #: _____ FAX #: _____

Email Address: _____

Current Lodge: _____

Occupation: _____

How would you best like to assist the Consistory? (Unique skills we might use?)

Application fee: \$75.00 (for sash, name tag, member packet) may be paid with application or prior to initiation ceremony. Note: There are NO annual dues.
Please make check payable to: **Knights of Saint Andrew - Denver Consistory**
Send application & check to:

Secretary - Denver KSA
1370 Grant St,
Denver Co 80203

Official use only:

Date application received: _____ Check # _____ Amount _____

Name Badge ordered ____/____/____ Email added _____

Date Knighted: ____/____/____ Booklet Issued _____