

**NOTE:** Applications must be filled out in ink or typed.  
**COMPLETE ALL BLANKS**  
Please read over carefully

Print or Type:

(Miss)  
I, (Mrs.) \_\_\_\_\_

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

Telephone \_\_\_\_\_ E-mail \_\_\_\_\_

Hereby apply for membership in the CATHOLIC DAUGHTERS OF THE AMERICA through

Court Our Lady of the Holy Trinity No. 2661 City TX County Bexar State TX

and do declare and say:

1. I am a member of \_\_\_\_\_ Catholic Church.  
located at \_\_\_\_\_
2. I will abide by the Bylaws, Rules and Regulations of the Order.
3. I am over eighteen (18) years of age.

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

Date of Application \_\_\_\_\_

**NOT OFFICIAL APPLICATION.** You may print this form and bring it with you to a monthly meeting OR you can mail it to Membership Chairperson and Vice Regent, Grace Lambert, at 2602 Bayhill Cove, San Antonio, TX 78258. Current membership dues are \$25 per year.  
Please make checks out to: Court Our Lady of the Holy Trinity #2661

*KINDLY SUPPLY information requested below*

**CATHOLIC DAUGHTERS OF THE  
AMERICAS**

**APPLICATION FOR**

**MEMBERSHIP**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
*(name)*

Date of Pledge \_\_\_\_\_

***COURT Our Lady of the Holy Trinity NO. 2661***

***CITY San Antonio***

***STATE TX***

\_\_\_\_\_  
*(Signature of Regent)*

***NOTE:*** The Financial Secretary within five (5) days after the pledge of the applicant shall forward the white form properly filled out to the National Office at 10 West 71<sup>st</sup> Street, New York, NY 10023