



CHURCH OF THE NATIONAL KNIGHTS

KU KLUX KLAN

Application For Citizenship

I, the undersigned, a true loyal citizen of the united states of America, being a white gentile person of temperate habits, sound in mind, a believer in the tenants of the Christian religion, the maintenance and principals of white supremacy/separatism, do most respectfully apply for citizenship in The Church Of The National Knights Of The Ku Klux Klan Inc.

I certify and guarantee, on my honor, that I will honor and comply with all the rules and obligations that are required of me in the event that I am selected as a member of the above mentioned organization. I vow to obey all the rules and regulations set forth in the aforementioned organization, including its constitution, by laws and edicts, and I pledge I will not violate any state or federal laws at any time. I further certify that I have not been a banished member of any other Ku Klux Klan organization. In the even that I decide to resign or become banished from this organization, I understand and acknowledge that I am obligated to forfeit and return any and all klan paraphernalia (books, patches, robes and any other items pertaining to the klan) to an officer of said organization.

Upon membership of the aforementioned organization, I understand that I may be required to pay local dues to my klavern in accordance to any expenses we may incur for meetings, rallies, or any other event that requires our financial support. Donations to the national headquarters are accepted, but not mandatory. However, any donations will help contribute to the costs of

maintaining our organization, as well as, assist in mailing, copying, and obtaining materials for all members new and old.

Please completely fill out the following information, and enclose a picture I.D. of yourself before returning this application.

Sincerely,

Church of The National Knights of the Ku Klux Klan

First Name _____

Date of Birth _____

Middle Initial _____

Phone Number _____

Last Name _____

Email _____

Address _____

Signature _____

(please enclose clear image of your picture I.D. for our records)

Return to:

Rev. Jon Welch

P.O.Box 202

Panama, Ny. 14767

