



Online Membership Application Walkthrough

Starting Your Application:

1. Go to **kofc.org/joinus**
2. Click **Join** in the upper right-hand corner

The screenshot shows the homepage of the Knights of Columbus website. At the top left is the KofC logo. To its right is the text "KNIGHTS OF COLUMBUS". In the upper right corner, there is a language dropdown menu set to "ENGLISH" and two buttons: "JOIN" (highlighted with a red arrow) and "SIGN IN". Below the header is a navigation bar with four tabs: "DISCOVER" (active), "MEMBERSHIP", "BENEFITS & PRICING", and "FAQ". The main content area features the heading "DISCOVER OUR LEGACY" and a "CONTACT US" button. Below this is a video player with the title "Man on a Mission" and a thumbnail image of a man looking up. The video player includes "Watch later" and "Share" icons.



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3. If you need to get to the application in French or Spanish toggle the language settings in the upper right-hand corner



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4. Fill in all the all the information.
5. Attest to being a baptized, practical Catholic male, and agree to the laws and rules of the Knights of Columbus.
6. Click **proceed to join**.

Note: Each Online member must have their own unique email address.



KNIGHTS OF COLUMBUS

JOIN THE KNIGHTS OF COLUMBUS TODAY!

If you do not live in the United States or Canada, please [click here](#).

Since 1882, membership in the Knights of Columbus has been open to men 18 years of age or older who are "practical" (that is, practicing) Catholics in union with the Holy See. Since that time, the Knights of Columbus has understood "practical catholic" to mean a Catholic who accepts the teaching authority of the Catholic Church on matters of faith and morals, aspires to live in accord with the **precepts of the Catholic Church**, ⓘ and is in good standing in the Catholic Church.

Fields indicated with * are required.

State/Province

Name

Email

Confirm Email

Date of Birth


Preferred Language

I am a baptized Catholic male *

I am a practical Catholic *

I agree to abide by the [Laws and Rules of the Knights of Columbus](#), and accept the [Privacy Policy](#). *

Captcha *

I'm not a robot  [Privacy - Terms](#)

On my honor as a Catholic gentleman I declare that the above is true.

PROCEED TO JOIN >



Online Membership Application Walkthrough

7. Fill in all the information.

Note: The state division the member belongs to is based on their home address provided in this section.

JOIN THE KNIGHTS OF COLUMBUS TODAY!

INFORMATION
PAYMENT
SUBMIT

Fields indicated with * are required.

Title

First Name

Middle Initial

Last Name

Suffix

Email

Mobile Phone

Date of Birth

Preferred Language

MAILING ADDRESS:

Street Address

Zip/Postal Code

City

State

Country

I am interested in joining a local council.

I am a former member of the Knights of Columbus.

I have or previously held insurance with



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- 8. If the member is interested in joining a local council, **check the box.**
- 9. If the member knows the specific council he would like to join, type the council number in the **box.**
- 10. If they are a former member or have previously held Insurance with the Knights of Columbus, **please check any relevant boxes.**

Note: By indicating interest in a local council, the State Deputy, Membership Director and Online Member Coordinator are notified by email and the member is populated in the prospect tab on officers online.

Street Address *

Country *

State *

City *

Zip/Postal Code *

I am interested in joining a local council. ⓘ

Preferred Council # *

If Known

I am a former member of the Knights of Columbus. ⓘ

I have or previously held Insurance with the Knights of Columbus. ⓘ

Parish Name *

Parish City *

State *

How did you hear about us? *



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- 11. Enter Parish information and State.
- 12. Select “How did you hear about us” from the drop-down menu.
- 13. Click Continue

Note: If K of C Member is selected, a proposer number field will pop up.

I am interested in joining a local council. *i*

I am a former member of the Knights of Columbus. *i*

I have or previously held Insurance with the Knights of Columbus. *i*

Columbus. *i*

Parish Name

Parish City

State

How did you hear about us?

Select One

- Select One
- Search Engine
- Social Network
- K of C Website
- Email
- K of C Agent
- K of C Member
- K of C Council
- Event
- Other Event
- TV
- Newspaper
- Radio
- Other

CONTINUE >

I am a former member of the Knights of Columbus. *i*

I have or previously held Insurance with the Knights of Columbus. *i*

Parish Name St. Mary's *

Parish City Branford *

State Connecticut *

How did you hear about us? K of C Member *

Proposer Member Number Enter Numbers only *

If Known

CONTINUE >



Online Membership Application Walkthrough

- 14. Insert a promo code, if applicable. Click apply.
- 15. Put in credit card information.
- 16. **Click Continue.**
- 17. Confirm that all information is correct.
- 18. **Click Submit.**
- 19. The member will receive a confirmation email that their transaction was completed.

JOIN US TODAY

INFORMATION **PAYMENT** SUBMIT

AMOUNT DUE: \$30.00

Promo Code [APPLY >](#)

Fields indicated with * are required.

Name on Card *

Card Type *

Card Number *

Expiration Date * *

CVV *

Auto Schedule Yearly Payment of \$30/year.

BILLING ADDRESS:

Mailing Address is same as Billing Address.

[CONTINUE >](#) [BACK](#)

JOIN US TODAY

INFORMATION PAYMENT **SUBMIT**

Please review the provided information for accuracy & click on 'Submit':

You have selected automatic annual renewal for your membership dues. You must notify Knights of Columbus if you wish to change or cancel this transaction. Billing preferences can be managed online through the member portal or you can contact us at join@kofc.org.

AMOUNT DUE: \$30.00

MEMBER INFORMATION: [EDIT](#)

Name: Mr Bob M Marlowe Sr
 Email: testtest@kofc.org
 Mobile Phone: 203-752-4633
 Date of Birth: 01/01/1950
 Parish Name: St. Mary's (Baltimore, MD)
 How did you hear about us?: K of C Agent

PAYMENT INFORMATION: [EDIT](#)

Name on Card: Bob Marlowe
 Credit Card Number: VISA xxxxxx...1111
 Expiration Date: 0520

BILLING ADDRESS: [EDIT](#)

1 Columbus Plaza
 Baltimore, MD 90210 US

MAILING ADDRESS: [EDIT](#)

1 Columbus Plaza
 Baltimore, MD 90210 US

[SUBMIT >](#)