The Knights Party Application for Association Mail this form to: The Knights / PO Box 2222 / Harrison, AR 72601 / www.kkk.com

Name as it should appear on cert	tificate) (please print clearly)		
address			
City		State	_Zipcode
Phone	Date of Birth		Occupation (If retired
tell what you did before)			
e-mail address (please print clea	rly)		
I would like to make an automa page) You can call us and stop a		50\$100other\$	_(Use my credit card Info at bottom of this
dependents. I believe in the ideal I understand that The Knights Pal understand that (The Knights) the Republican Party or The Gradirector Pastor Thomas Robb I understand that I am not a reproduce to follow the guidelines a Knights Party and its ultimate go I understand that The Knights Party and its ultimate go I understand that The Knights Party and its ultimate go I understand that The Knights Party and its ultimate go I understand that The Knights Party and its ultimate go I understand that The Knights Party is understa	Is of Western Christian civilization a arty is legal and law abiding and that and (The Knights Party) are one a and Old Party and that these titles are esentative of The Knights' Party as set by headquarters to the best of oal of political power and White Chr arty and its national director Pastor Te e find my potential as a Klansman or	and profess my belies t I will never be aske and the same and can e the legal trademark my ability and to do ristian Revival. Thomas Robb has a to r Klanswoman. They a recruiter they will	d to commit an unlawful act. be used interchangeably just as the GOP and s of The Knights Party,inc. and it's national what I am able to promote the interests of The rained staff at its national headquarters in can answer my questions, help me and give be there to assist me and instruct me in
Signature			
Date			
Below: Check One			
	for single - \$50 for married couple his form [check or money order]	- or \$25 for student,	full time homemaker, person on reduced
Application fee of \$40 fixed income should be charged		- or \$25 for student,	full time homemaker, person on reduced
Credit card Info: Name on Card			Credit Card type
Ex DateCredit Card Numb	ber		
-	•		
	his is a verification number- 3 or 4 digit		
Total Amount being Charged Now			