

ORDO PAUPERUM COMMILITUM CHRISTI
ET TEMPLI SOLOMONIS
EQUITES TEMPLI
MAGNUM PRAECEPTORUM

P.O. Box 7634 Horseshoe Bay, Texas, 78657
E-Mail: preceptor@knighttemplar.org
(Please TYPE or PRINT all information)

Office Use Only

PRECEPTORY:

LOCATED AT:

CURRICULUM VITAE OF

ADDRESS

CITY

STATE

ZIP CODE

PHONE

E-MAIL

DATE OF BIRTH

CHRISTIAN DENOMINATION

Attach or Email
Recent Photo Here

Photo must be of
Passport size, of full
face on neutral
background

FAMILY BACKGROUND (SPOUSE, CHILDREN, PARENTS, OTHER INFO.)

FAMILY LINEAGE

ARMIGER

OCCUPATION /PROFESSION

EMPLOYER (INCLUDE ADDRESS, CITY, STATE, ZIP, PHONE)

PREVIOUS EMPLOYER(S) LIST ALL EMPLOYMENT FOR THE LAST THREE YEARS (INCLUDE TYPES OF WORK)

EDUCATION (DEGREE / HIGHEST ATTAINED / SCHOOLS)

MILITARY SERVICE? YES NO BRANCH RANK

DISCHARGED (DATE) HONORABLE YES NO (EXPLAIN)

CHARITIES / PHILANTHROPIC ACTIVITIES / ORGANIZATION MEMBERSHIPS

HONORS / AWARDS / OTHER COMMENTS

HAVE YOU EVER BEEN SERVED WITH AN EX-PARTE OR PROTECTION ORDER FOR DOMESTIC VIOLENCE? YES NO

HAVE YOU EVER BEEN **ARRESTED** FOR A VIOLATION OF ANY CRIMINAL LAW? YES NO

HAVE YOU EVER BEEN **CHARGED** WITH A VIOLATION OF ANY CRIMINAL LAW? YES NO

HAVE YOU EVER BEEN **CONVICTED** OF A VIOLATION OF ANY CRIMINAL LAW? YES NO

HAVE YOU EVER BEEN SERVED WITH A CRIMINAL SUMMONS? YES NO

ARE YOU CURRENTLY ON PAROLE, PROBATION, OR MANDATORY SUPERVISION? YES NO

HAVE YOU EVER BEEN CONFINED OR COMMITTED, INCLUDING VOLUNTARY COMMITMENT, TO A MENTAL INSTITUTION OR HOSPITAL FOR TREATMENT OF A MENTAL DISORDER OR DISORDERS? YES NO

ARE YOU ADDICTED TO, OR HAVE YOU EVER BEEN, OR ARE YOU CURRENTLY BEING TREATED FOR ALCOHOLISM? YES NO

ARE YOU ADDICTED, OR HAVE YOU EVER BEEN ADDICTED, TO CONTROLLED DANGEROUS SUBSTANCES? YES NO

PLEASE EXPLAIN ANY YES ANSWERS. WORKING TOWARD MENTAL HEALTH, RECOVERY FROM ADDICTION, AND / OR REFORMATION FROM MINOR CRIMES ARE HONORABLE. ADMISSION TO PAST CHALLENGES, ABUSE, OR VIOLATIONS DOES NOT NECESSARILY PRECLUDE MEMBERSHIP IN OPCCTS.

REFERENCES (PLEASE PROVIDE AT LEAST ONE PERSONAL AND ONE PROFESSIONAL REFERENCE WHO HAS KNOWN YOU FOR AT LEAST THREE YEARS AND IS NOT RELATED TO YOU IN ANY WAY, NAME, ADDRESS, PHONE)

CANDIDATE'S STATEMENT:

(The Applicant is urged to write a brief statement of any length as to why he or she feels suitable for admission to the Order. Include here any additional facts which would assist the Order in making a decision regarding membership.)

The above information is provided to assist OPCCTS and I provide it of my own free will. I do hereby declare and affirm under penalties of perjury that the contents of this application are true and correct to the best of my knowledge, information and belief and I so indicate by signing below in the designated space. I agree to supply any additional information requested of me. I know of no material fact which by omission might detract from my admission to the Order of the Temple. FALSE INFORMATION WILL BE SUFFICIENT GROUNDS FOR DENIAL OF THE APPLICATION.

Signed: _____ Date: _____

**UNTO THE SPIRITUAL PROTECTORATE AS FONS HONORUM,
AND TO THE GREAT PRECEPTOR:
YOUR EXCELLENCIES:**

*Knowing the high purpose of **Ordo Pauperum Commilitum Christi et Templi Solomonis**, I have the honor to accept the invitation to submit my **Petition For Admission**.*

I solemnly swear upon my Sacred Honor to observe all of the Statutes, Rules and Regulations of the Order; which I have read and understand; to contribute to the preservation, growth and honor of the Order by both service and oblation. I recognize the duties and honor of membership, and will uphold them to the best of my ability. I pledge my Oath of Fealty to the Spiritual Protectorate as Fons Honorum of the Order in all matters pertaining to the Order; and I further recognize and honor the Seat of the Office of Grand Master of Knights Templar, and to the Fellow-Soldier holding that position, and his lawfully-elected successor(s). I will at all times and in all ways conduct myself in accordance with the ideals of Chivalry and Christian Charity which are the foundation of this most noble Order.

Signed: _____ Date: _____

GUARANTOR'S STATEMENT

We have examined this Applicant and attest to his / her education in and knowledge of the ideals, purpose, traditions, Statutes, Rules and Regulations of the Order. We attest to his / her suitability for membership and undertake the responsibility for his / her introduction to the works, charities and affairs of the Order and will maintain an interest in his / her participation and contribution.

Guarantor / Date: _____

Guarantor / Date: _____

MATRICULA

I, _____, in the Name of the Father, the Son, and the Holy Ghost and being baptized in the Christian Religion, do hereby pledge my fealty and allegiance to **ORDO PAUPERUM COMMILITUM CHRISTI ET TEMPLI SOLOMONIS**, and my obedience to the Great Preceptor, Provincial Preceptor, Preceptor, Commander, and all Officers of the Order in all Templar matters. I pledge my obedience to the Statutes, Rules, Regulations and Usages of the Order, and will guard and uphold them to the best of my ability. I pledge my Oath of Fealty to **the Spiritual Protectorate** as Fons Honorum of the Order in all matters pertaining to the Order, and I further recognize and honor the Seat of the Office of the Grand Master of Knights Templar, the Fellow-Soldier of Christ holding that position, and his lawfully and constitutionally-elected successor(s). If so requested I will produce, to the best of my ability, written evidence, issued by proper authority, on information given in this Curriculum Vitae, and I do understand and agree that incorrect or falsified information given herein, or violation of any part of this my solemn Oath, may lead to my termination from Membership and expulsion from the Order.

I do further agree and pledge that, should serious disagreement arise between myself and a fellow member of the Order, I shall conduct myself in the spirit of Chivalry and attempt to resolve the matter peacefully between ourselves. Failing the peaceful resolution of the matter, I agree to place the matter before a Tribunal of Officers of the Order for decision, and shall abide by that decision, with appeal to and decision by the Great Preceptor or his Designee being final. I pledge to NOT take the matter outside of the Order (i.e., to civil authorities) for resolution, without peril of being suspended or expelled from the Order for such action.

I agree and pledge to observe the Feast Days and Days of Observance of the Order to the best of my ability.

I agree and pledge, to the best of my ability and in keeping with Christian Chivalry, to treat all persons decently as fellow Children of God.

I agree and pledge to fully support the Christian ideals and intentions of the Order to the best of my ability.

I agree and pledge to separate and remove myself from membership in the Order if for any reason I am no longer willing or able to continue in my promises and obligations to it.

I agree and recognize that all on-boarding passage fees are a non-refundable donation, and that issued regalia remain the property of OPCCTS. I commit to returning all equipment to the Order (mantle, cross, etc.) promptly upon any resignation or termination from the Order.

To all this I sincerely and solemnly promise and swear, placing only before this my duty to God, my family, and duty and allegiance to my Country, now placing my hand upon the Word of God and pledging my Oath.

ASPIRANT:

WITNESS:

DATE: _____

I, _____, do hereby authorize a review and full disclosure of all records, or any part thereof, concerning myself by/to any duly authorized agent of OPCCTS, whether the said records are public or private, and including those which may be deemed to be of a privileged or confidential nature concerning this applicant. The intention of this authorization is to provide information, which will be utilized, for investigative resources material for the purpose of processing this application. I authorize the full and complete disclosure of the records of educational institutions, financial or credit institutions, and the records of commercial or retail mercantile establishments and retail credit agencies; medical and psychiatric consultation and/or treatment, including those hospitals, clinics, private practitioners, the U.S. Veterans' Administration, and all military and psychiatric facilities; public utility companies; employment and pre-employment records including background investigations reports, the results of polygraph examinations, efficiency ratings, complaints or grievances filed by or against me; or complaints of a civil nature made by or against me. A photocopy of this release form will be valid as an original hereof, even though the said photocopy does not contain an original writing of my signature. I agree to indemnify and hold harmless the person to whom this request is presented, his agents and/or employees, from and against all claims, damages, losses and expenses, including reasonable attorneys' fees arising out of or by reason of complying with this request.

Applicant: _____

Date: _____

OFFICIAL ENDORSEMENTS

Marshall Approval: _____ ***Date:*** _____

Seneschal Approval: _____ ***Date:*** _____

Great Preceptor Approval: _____ ***Date:*** _____

Investment Place / Date / Rank of Admission: _____

Seals of the Order: