

IN-CD1

SUBMIT: After Each Drive



Knights of Columbus
INDIANA STATE COUNCIL

CHURCH DRIVE FORM select: ___ Fall ___ Spring

Council Number: _____ District: _____ Date: _____

Advance Phase (X all that apply)

- ___ contacted Pastor
- ___ involved insurance agent
- ___ pre-ordered supplies

Methods of Advertising (X all that apply)

Number of prospects: _____

- ___ Parish bulletin
- ___ Mass announcement
- ___ Priest pulpit endorsement
- ___ Priest written endorsement
- ___ Bishop's Advertisement

Info Session/Orientation Date: _____

OR OTHER MEMBERSHIP CAMPAIGN:

Explain fully and in detail:

Number of Prospects: _____

Grand Knight: _____

Council Membership Director _____

Send Original to: State Membership Director
Copies to: State Program Director
District Deputy , Council Records

A fill-in version of this form is available online at
<http://indianakofc.org/forms/>