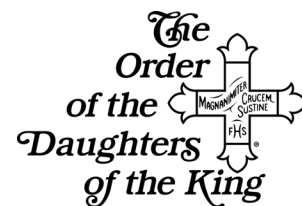


Application for Dues Assistance



For detailed information regarding the application for and processing of dues assistance, please refer to The Order's Dues Assistance Policy and Procedures found on the website under Resources > Policies and Procedures of The Order. Daughters requesting dues assistance must complete page 1 only. Page 2 is for officers' processing.

Date: _____ Member # (if known): _____

Name: _____
FIRST MIDDLE LAST

Address: _____

City: _____ State: _____ Zip: _____

Phone: () _____ Cell: () _____

Email: _____ Daughter at Large: Yes _____ No _____

Provincial Assembly: _____ Diocesan Assembly: _____

Name of Parish and City: _____

Chapter: _____ Charter #: _____

I am requesting Dues Assistance for:

- ☐ Current Dues Owed _____ (State amount)
- ☐ Permanent Dues Assistance (refer to the Dues Assistance Policy and Procedures for further details in completing this form, Chapter presidents may complete this application for permanent dues assistance on behalf the Daughter)

To be eligible for Permanent Dues Assistance, applicants must meet **ALL** the following prerequisites:

- ☐ is **current** in the payment of her dues
- ☐ is **permanently** incapacitated (physically or mentally) as indicated by a lack of physical or mental ability that results in the significant limitation of a person's capability to manage her own personal care, property or finances
- ☐ has an on-going financial hardship
- ☐ is unable to receive financial assistance from their chapter, diocesan assembly, or provincial assembly (requires signatures on page 2.)

Daughters receiving Permanent Dues Assistance will no longer:

- be eligible to serve as a delegate to Triennial
- be eligible hold office at any level of The Order
- receive *The Royal Cross*

Briefly describe the circumstances that necessitate this request: _____

Applicant's Signature: _____

- ➔ Upon completion, please submit to your chapter president.
Daughters at Large, please submit to your diocesan assembly president.

Application for National Dues Assistance Continued

----- Below this Line is for Administrative Use by Officers Only -----

Dues Assistance Approval

Name of Daughter requesting assistance: _____

Chapter (check one)

- ☐ Chapter is paying the dues ☐ Parish/Clergy is paying the dues
- ☐ Chapter cannot pay the dues – forwarding the application to the diocesan assembly president
- ☐ Chapter president verifies that the Daughter meets the prerequisites for permanent dues assistance and the chapter cannot pay the Daughter's annual dues going forward

Clergy Signature: _____ Date: _____

Chapter President Signature: _____ Date: _____

- File a copy of this document in your chapter's records and follow up for final disposition and notification.

Diocesan Assembly (check one)

- ☐ Diocesan assembly is paying the dues – notify chapter president
- ☐ Diocesan assembly cannot pay the dues – forwarding the application to the provincial assembly president
- ☐ Diocesan assembly president verifies the Daughter meets the prerequisites for permanent dues assistance and the diocesan assembly cannot pay the Daughter's annual dues going forward

Diocesan Assembly President Signature: _____ Date: _____

- File a copy of this document in your diocesan assembly's records and follow up for final disposition.

Provincial Assembly (check one)

- ☐ Provincial assembly is paying the dues – notify diocesan assembly and chapter presidents
- ☐ Provincial assembly cannot pay the dues – forwarding the application to the national office
- ☐ Provincial assembly president verifies the Daughter meets the prerequisites for permanent dues assistance and the provincial assembly cannot pay the Daughter's annual dues going forward

Provincial Assembly President Signature: _____ Date: _____

- File a copy of this document in your provincial assembly's records and follow up for final disposition.

National Membership Chair (check one)

- ☐ National dues assistance is approved ☐ National dues assistance is not approved
- ☐ Permanent dues assistance is approved ☐ Permanent dues assistance is not approved

If dues assistance is not approved, state reason _____

National Membership Chair Signature: _____ Date: _____

- File a copy of this document in the national office records and follow up for final notification.

☐ Daughter lovingly notified of decision by _____ on _____

NAME

DATE