

**Supreme Convention
Nomination Form / Background Information
Quebec City, Quebec Canada
August 5-8, 2024**

Full Name: (As shown on Passport)		Date of Birth: (MM-DD-YYYY)		KofC Member Number:	
Address:		Number of Supreme Conventions attended?		Council Number:	
Cell Phone:		Email:			
Passport Number:		Expiration Date:			
KofC Insurance Member: (Yes / No)					
Nominee Signature:			I desire to represent the State of South Dakota at the 2024 Supreme Convention		
Nominated by:			Name of KC member to be present at State Convention for purpose of nominating		

Spouse Full Name: (Passport)		Date of Birth:	
Address:		Email:	
Cell Phone			
Passport Number:		Expiration Date:	

2 Attachments
Member Copy page 2 of Passport
Spouse Copy page 2 of Passport