



The Order of the Daughters of the Holy Cross

APPLICATION FOR MEMBERSHIP

Submit to: Dian Ray, Provincial Treasurer

P.O. Box 81161, Midland, TX 79708

Email: treasurer@daughtershc.org

☐ I am joining a Chapter ☐ I am joining as a Daughter-at-Large

Date: _____ Service of Admission Date: _____

Applicant Name: _____ Date of Birth (mm/dd/yy): _____

Mailing Address: _____

City: _____ State/Province: _____ Country: _____ Zip: _____

Phone: _____ ☐ Cell ☐ Home E-mail: _____

Preferred Method of Contact (select one): ☐ Phone Call ☐ Text ☐ E-mail ☐ Mail

Applicant's Church: _____ Applicant's Diocese: _____

Church Mailing Address: _____

Church City: _____ State/Province: _____ Country: _____ Zip: _____

Priest in Charge: _____ Church Phone: _____

Clergy Email: _____

Enrollment fee includes either ☐ Large or ☐ Small cross \$ 75.00

Additional cross, add \$50 for large or \$35 for small \$ _____

Total Amount Enclosed (make checks payable to DHC) \$ _____

Please verify the following statements by checking each box.

☐ I have read the DHC Handbook and agree to support the Faith Statement of The Order.

☐ I have completed the DHC three-month discernment period and study (including project).

Applicant Signature: _____

Clergy Signature: _____

Chapter President/Mentor Signature: _____

Chapter Name: _____ Chapter # _____