

Council of Anointed Kings of the Commonwealth of Pennsylvania



Member Information Update

*** PRINT LEGIBLY ***

Check all that apply: *I am a...*

Member

Non-Member

Council Recorder

Council Representative

Anointed Kings Officer (Give Office: _____)

Council Name: _____ Council No: _____

Your Name (PRINTED): _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Home: (_____) _____

Work: (_____) _____

Mobile: (_____) _____

E-mail: _____

Please provide complete information and return to Illustrious Scribe at

Anointed.Kings@gmail.com