

# The Brotherhood Of The Knights Of The Vine

APPLICATION FOR MEMBERSHIP / Individual Application (Please Print or Type)

Return to: KOV-Houston Chapter  
3 Briar Hill Drive  
Houston, TX 77042

Mr.  
Mrs.  
Ms.

\_\_\_\_\_

First	Middle Initial	Last
		Cell / Work

Age \_\_\_\_\_ Spouse's Name \_\_\_\_\_ Best Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Home Address: \_\_\_\_\_ (Zip)

Business Address: \_\_\_\_\_ (Zip)

Occupation: \_\_\_\_\_

Of what professional, scientific, fraternal or social organization are you a member?

\_\_\_\_\_  
\_\_\_\_\_

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Special Qualifications: List items of interest that reflect your support of the vines and wines of America (e.g., drink only California wines, etc.) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

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Are you affiliated with any other wine appreciation group or gourmet society in the world? \_\_\_\_\_

\_\_\_\_\_

The \$225.00 Initiation Fee covers expenses relative to the Knighthood Enthronement Ceremony.  
(Application is per person. Please make check or money order payable to the Brotherhood of the Knights of the Vine, 3 Briar Hill Dr., Houston, TX 77042. Note: Cost of Enthronement Dinner is not included in Initiation Fee.)

Date \_\_\_\_\_ Signature \_\_\_\_\_  
*America's Wine Brotherhood in a crusade for its wines throughout America and the World.*

SPONSORING KNIGHT or GENTLE LADY

Name \_\_\_\_\_

First	Middle Initial	Last
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Title in the Order \_\_\_\_\_

Address \_\_\_\_\_

Telephone Number \_\_\_\_\_ Recommendations of the Sponsoring Knight/Gentle Lady

\_\_\_\_\_

Recommended Title in the Order \_\_\_\_\_  
Your initiation fee is not deductible as a charitable contribution unless you are part of the trade. 1987 TAX ACT (Rev 11-05-2019)



**KNIGHTS OF THE VINE  
HOUSTON CHAPTER, INC.**

**Member Information Sheet**

**Date:** \_\_\_\_\_

**Member Name:** \_\_\_\_\_

**Date of Birth (Month/Day):** \_\_\_\_\_

**Spouse Name:** \_\_\_\_\_

**Home Address:** \_\_\_\_\_

**Best Phone:** \_\_\_\_\_

**Business Name:** \_\_\_\_\_

**Business Address:** \_\_\_\_\_

**Business Phone:** \_\_\_\_\_

**Preferred Email Address:** \_\_\_\_\_

**Address to Print in Houston Chapter Directory:** (please "X" your preference)

**Home** \_\_\_\_\_ **Business** \_\_\_\_\_ **Both** \_\_\_\_\_

**Contact Info for Houston Chapter Directory:** (please "X" your preference)

**Home** \_\_\_\_\_ **Business** \_\_\_\_\_ **Email** \_\_\_\_\_

**Year Joined Houston KOV:** \_\_\_\_\_ **KOV Rank:** \_\_\_\_\_

**Member Signature:** \_\_\_\_\_

Please return to: KOV - Houston Chapter, Inc., 3 Briar Hill Dr., Houston, TX 77042  
or email to: [info@KOVHouston.org](mailto:info@KOVHouston.org) or fax to: 713-432-9464