



LAY FRATERNITIES OF ST. DOMINIC
PROVINCE OF ST. JOSEPH

REQUEST FOR RECEPTION

(Please PRINT Your Responses)

Region: _____ Chapter #: _____ Chapter Name: _____

Name: _____ Date: _____

- 1. The Lay Fraternities of St. Dominic follow a specific Rule and Particular Directory. Do you have a copy of both? Yes No
- Do you understand their content and your obligations? Yes No
- Are you willing to obey and adhere to their requirements? Yes No

If "No" to any of the above questions, please explain: _____

- 2. The rights of Dominican membership bring communal obligations, among which are the material support of the Lay Fraternities of St. Dominic by payment of any assessed Provincial, Regional, and Chapter dues; support of your Lay Dominican community with regular attendance; participation in Chapter apostolates; and a willingness to serve in elected positions.
- Are there any obstacles which would prevent you from fulfilling any of these obligations? Yes No

If "YES", please explain: _____

- 3. Dominican membership implies a willingness to engage in the Dominican charisms of *Prayer* (particularly in the recitation of the Liturgy of the Hours), and *Study* through regular Formation Programs.
- Do you know of any obstacles which would prevent you from adhering to these requirements? Yes No

If "YES", please explain: _____

- 4. Membership in the Lay Fraternities of St. Dominic requires obedience and adherence to the Constitutions, Statutes, Norms, Declarations of the Master of the Order, and the Magisterium of the Church (the authority claimed by the Roman Catholic Church to teach true doctrine).
- Does this present any obstacle or hesitancy to you? Yes No

If "YES", please explain: _____

5. What have you gained from the Postulancy lesson phase? (use other side if needed) _____

6. Why do you wish to be received into the Lay Fraternities of St. Dominic? (use other side if needed) _____

7. OPTIONAL: Have you chosen a religious name? Yes No Name: _____

I CERTIFY THAT I AM A MEMBER OF AND IN FULL COMMUNION WITH THE ROMAN CATHOLIC CHURCH. AS I REQUEST ADMISSION TO THE LAY FRATERNITIES OF ST. DOMINIC, I UNDERSTAND, ACCEPT AND HONOR THESE ASPECTS OF THE DOMINICAN CHARISM AS EXPRESSED ABOVE. I UNDERSTAND THAT MY APPLICATION FOR RECEPTION WILL BE EVALUATED BY THE APPROPRIATE OFFICER(S) AND I ACCEPT THE DECISION OF THAT OFFICE.

Signature: _____

Date: _____

Chapter Councilor Review & Signature: Pres - _____ Date: _____
 ACCEPTED Vice Pres - _____ Date: _____
Alternate - _____ Date: _____
 NOT ACCEPTED Formation Dir - _____ Date: _____

Form I
Provincial Form 9: April, 2010
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