

MEMBERSHIP APPLICATION / RENEWAL

Mail this form with your payment to: Calaveras Genealogical Society, P.O. Box 1472, San Andreas, CA 95249-1472

Name _____ Date _____

Mailing Address _____

City _____ State _____ ZIP _____ Telephone (____) _____

E-mail address _____

The Froghorn quarterly newsletter will be emailed unless you check here _____ to receive a printed version by mail.

Dues are for the period: July 1st thru June 30th of each year.

_____ Individual (\$15/year) _____ Joint (\$20/year) two or more members sharing a household

_____ Lifetime (\$150) _____ Organization (\$25/year)

[New Individual members joining after January 1st pay \$7.50 (Joint, \$10) for the remainder of the fiscal year.]

If you would like to share the SURNAMES and LOCATIONS you are researching, please list them below.*

List the surname first, then know locations, from the most recent to earliest known location. (Example: JOHNSON: North Carolina; Virginia-Falls Church; England). Use back or separate sheet, as needed.

***Note: Unless a member specifically instructs otherwise, CGS publishes members' contact and surname information in *The Froghorn*, and includes the names and locations (but not members' contact information) in the Surname and Resource Directory on our website: calaverasgenealogy.com.**