

FALMOUTH GENEALOGICAL SOCIETY

Website: http://www.falgen.org/

MEMBERSHIP FORM

Required Items*

Membership Category		Single \$20	Family \$20	Organization \$20
Check one*	Quarterly newsletter		Quarterly newsletter	Quarterly newsletter
		oting privileges	with voting privileges	with no voting privileges
List additional names if family membership				
First Name*	MI	Last Name*		
Primary Address*				
Mailing/Street Address*				
City/State/Zip*				
Telephone			_	
Check one				Home Cell
E-mail address or				
addresses		-	_	
Send Quarterly				1
Newsletter	U e-m	ail only 🔲	hard copy only	e-mail & hardcopy
Check one*				
Seasonal Address				
Indicate months				
Mailing/Street Address				
City/State/Zip				
Telephone			_	
Check one				
Volunteer Interests Check your areas of interest. Add comments to back of form.				
Newsletter		Publicit	y [[]	Meeting Set-up
Cemetery Project		Member	rship	Finance
Library			nting 🔲	Refreshment
Program				Publications
Other Areas of Interest				
Annual Dues				
Annual Dues for years @ \$20.00 per year			\$	
Additional contribution to assist the work of the Society				
Total Enclosed			\$	
Make check payable to <i>Falmouth Genealogical Society</i> and mail to				
Falmouth Genealogical Society				
P.O. Box 2107, Teaticket, MA 02536				