

# JACKSONVILLE GENEALOGICAL SOCIETY, INC.

## Application for Membership

Dues are paid on a Calendar year basis. Dues received after 31 October are credited with dues paid for the following year. Please check one of the following categories:

- |  |  |
|--|--|
| <input type="checkbox"/> Principal membership: \$25.00         | <input type="checkbox"/> Dual membership: \$ 5.00 *                |
| <input type="checkbox"/> Life (Principal) membership: \$260.00 | <input type="checkbox"/> Life (Dual): \$65.00 *                    |
| <input type="checkbox"/> Student: \$10.00                      | <input type="checkbox"/> Memorial: \$25.00 ** - In memory of _____ |

\* A Dual Member is a person residing at the same address as the Principal Member.

\*\* (Memorial Membership does not include issuance of Newsletters or Quarterly issues.)

**New Member**     **Renewing Member**     **Previous Member**     **Gift**    Date: \_\_\_\_\_

Title (Mr./Mrs./Ms./Dr.): \_\_\_\_\_

Name: \_\_\_\_\_  
                     First                                      Middle                                      Nickname                                      Maiden                                      Surname

Dual Member (First, Middle, Last Name): \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code (9 digit): \_\_\_\_\_

Email: \_\_\_\_\_ Your Website: \_\_\_\_\_

Telephone (Home): (\_\_\_\_)\_\_\_\_-\_\_\_\_ (Work): (\_\_\_\_)\_\_\_\_-\_\_\_\_

Birthday (Principal): \_\_\_\_\_ Birthday (Dual): \_\_\_\_\_ Wedding Anniversary: \_\_\_\_\_

Surnames you are researching (up to 5):

SURNAME	CITY	COUNTY	STATE	COUNTRY	DATES
Example: Smith	Timbuctu	Smithers	FL	USA	1880-1900
1.					
2.					
3.					
4.					
5.					

You are encouraged to submit a 5-generation pedigree chart with your application for our JGS Pedigree Charts Project

Circle ALL areas below that interest you:

- |             |              |           |           |              |                   |
|-------------|--------------|-----------|-----------|--------------|-------------------|
| Abstracting | Audit        | Education | Historian | Newsletter   | Cemetery Research |
| Programs    | Publications | Publicity | Proofing  | Refreshments | Secretary         |
| Research    | Telephone    | Treasurer | Typing    | Website      | Other _____       |

By signing below, you grant the Jacksonville Genealogical Society, Inc. permission to use your name, address, email address, and surname data on the JGS Website, in the JGS Website Search Engine, and in the JGS Membership list/directory (which is available to members). Telephone numbers will not be published on the internet but will be listed in the JGS Membership list/directory.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please mail this application, along with your payment, to:**

**Jacksonville Genealogical Society, Inc., PO Box 440488, Jacksonville, FL 32222-0005**

**For Office Use only:**

Date Paid: \_\_\_/\_\_\_/20\_\_\_ Amount Paid: \$\_\_\_\_\_ Type: \_\_\_\_\_ ID: \_\_\_\_\_ Year 1st Joined: \_\_\_\_\_