



ST. AUGUSTINE GENEALOGICAL SOCIETY

MEMBERSHIP APPLICATION

Membership is open to all who are interested in genealogy and who subscribe to the Society's Bylaws. Annual dues entitle the member to: [1] Attend regular meetings, [2] Vote on Society business, [3] Receive newsletters and official Society publications and [4] Access Members Only website

- | | | |
|---|--|---|
| <input type="checkbox"/> Single: \$20.00 | <input type="checkbox"/> Household: \$25.00 | <input type="checkbox"/> Institutional: \$20.00 |
| <input type="checkbox"/> Single Lifetime: \$100 | <input type="checkbox"/> Household Lifetime: \$125 | |
| <input type="checkbox"/> New Member | <input type="checkbox"/> Renewing Member | <input type="checkbox"/> Previous Member |

Member Name(s) Include maiden name, if applicable _____

[1] _____ [2] _____

Address _____

[1] Phone: H(____)____ - _____ Cell(____)____ - _____ Email: _____@_____

[2] Phone: H(____)____ - _____ Cell(____)____ - _____ Email: _____@_____

Genealogy Program You Use: _____ Surnames you are searching, **including state or country, and dates** (Ex: JONES, LA>GA>FL, 1850 - Now.) Use reverse side if necessary.

Level of Research: Beginner _____ Intermediate _____ Advanced _____ Expert _____

Area / subject I am most interested in learning about _____

Area / subject I have some expertise _____

Area/Subject I need some help _____

Circle ALL areas below that interest you and *in which you would participate*:

- | | | | | | |
|-------------------------|---------------------|---------------------------------|--------------|--------------|------------|
| Education | Historian | Newsletter | Find a Grave | Research | Technology |
| Library | Programs | Publications | Publicity | Refreshments | Websites |
| Special Interest Groups | Sharing my research | Assisting members with research | | | |

By signing, you grant the St Augustine Genealogical Society permission to use your name, address, phone number, email and surname data in the electronic Member Directory and on the Members only website. A Surname List will be published on the SAGS Public Website.

Signature: _____ Date: _____

For Office Use Only:

Date paid: ____/____/____ Amount Paid: \$ _____ Type of Membership _____ First year joined _____

Revised Jan 2017

Please return the application with your payment to:
St. Augustine Genealogical Society, Attn: VP-Membership,
6670 U.S. 1 South, St. Augustine, FL 32086.
Make checks payable to S.A.G.S.