

MEMBERSHIP APPLICATION

Name _____

Birth Date (optional) _____

Spouse's Name _____

Spouse's Birth Date (optional) _____

Address _____

ZIP+4 _____

Phone () _____

E-mail Address _____

Surnames & Areas Researching _____

Please check one: Renewal _____ -or- New Membership _____

Membership Type: INDIVIDUAL (\$18) _____

FAMILY (\$27) _____

NEWSLETTER ONLY (\$12) _____

CONTRIBUTING (\$35) _____

SUSTAINING (\$50) _____

PATRON (\$100 OR MORE) _____

INDIVIDUAL LIFE (\$432) _____

FAMILY LIFE (\$648) _____

Lifetime memberships may be paid
over a 12-month period.

Please return to:

QUESTING HEIRS GENEALOGICAL SOCIETY
P. O. Box 15102, Long Beach CA 90815-0102