

MEMBERSHIP APPLICATION

Name _____

Birth Date (optional) _____

Spouse's Name _____

Spouse's Birth Date (optional) _____

Address _____

ZIP+4 _____

Phone () _____

E-mail Address _____

Surnames, Areas, and Time Periods Researching _____

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

Membership Type: INDIVIDUAL (\$20) _____

FAMILY (\$30) _____

SUSTAINING (\$50) _____

PATRON (\$100 OR MORE) _____

INDIVIDUAL LIFETIME (\$480) _____

FAMILY LIFETIME (\$720) _____

Lifetime memberships may be paid over 12 months

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