

Please Clip or Print this Form, Complete and Mail With Your Check To The Address Below.

Longmont Genealogical Society Membership Application/Renewal			
Name		Maiden Name (Optional)	Birth date (Mo..& Day, not year)
If a <u>Family Membership</u> ; Second person's name		Second person's Maiden Name (Optional)	Second person's Birth date (Mo. & Day, not year)
Address			
(Street)		(City / Town)	(State) (Zip+4)
Telephone		E-Mail Address	
Date:	New _____ Or, Renewal _____		Mail check and application to: Longmont Genealogical Society P.O. Box 6081 Longmont, CO 80501 - 2077
Cash / Check #	Dues are for a <u>calendar</u> year; Jan. 1 to Dec. 31		
	Check as Appropriate: _____ Individual Membership \$ 25.00 per year _____ Family Membership \$30.00 per year _____ To receive the Heritage newsletter by mail, include an additional \$15 for printing and postage.		

To print this form on your computer printer click the print icon on your web browser immediately above the form and near the right side.