

# Grand Traverse Area Genealogical Society Membership Application

## Personal Information

- Name: \_\_\_\_\_
- Street Address: \_\_\_\_\_
- City: \_\_\_\_\_
- State: \_\_\_\_\_
- ZIP Code: \_\_\_\_\_
- Phone Number: \_\_\_\_\_
- Email Address: \_\_\_\_\_

## Membership Type

- Individual Membership \$20
- Family Membership (limit 2 members) \$25
- Organization Membership \$25

Please bring this form with your dues payment (cash or check) to our next meeting or mail it with a check to:

Grand Traverse Area Genealogical Society  
P.O. Box 2015  
Traverse City, MI 49685-2015