



Member(s) # _____ / _____
Date ____ / ____ / ____

Membership Application

Member

(Please Print Clearly)

Joint

Last Name _____ Last Name _____

First Name _____ First Name _____

Maiden Name _____ Maiden Name _____

Occupation _____ Occupation _____
(If retired, give former occupation)

Address: _____ City: _____

State: _____ Zip: _____ Phone (_____) _____ - _____

E-Mail: _____

(As a member you will receive a monthly newsletter via e-mail in Acrobat Reader)

Hobbies and Interest:

Member _____

Joint _____

Genealogical Expertise:

Member: Beginner ___ Intermediate ___ Advanced ___ Number of years _____

Joint: Beginner ___ Intermediate ___ Advanced ___ Number of years _____

What **surnames** are you searching? _____

What **localities** are you researching? _____

Membership fees payable to TVGS

Jan – Apr: Single \$20.00 _____ Joint \$25.00 _____

May – Aug: Single \$10.00 _____ Joint \$12.50 _____

After Sept 1: Single \$23.00 _____ Joint \$29.00 _____ (includes next year's dues)

*Please give this form and membership fees to the Membership Chair or mail to:

Attention: Membership Chair TVGS 27475 Ynez Rd. # 291 Temecula Ca 92591