



St. Louis Genealogical Society

Membership Application Form

(Please **print** clearly. All fields are required.)

New Member Renewing Member (member code above your name on mailing label): _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

(Important: Membership renewal notices and most StLGS communications will be sent to members by email.)

How many years have you been researching your family history?

- Less than 1 year 1–2 years 3–5 years 6–10 years More than 10 years

How did you learn about the St. Louis Genealogical Society?

- Newspaper, Radio Television Internet (Which website?) _____
 Friend/Family Library (Which library?) _____
 Don't remember Other (explain) _____

Which membership benefits have the greatest appeal to you?

- Meet and share with others interested in genealogy Learn more about genealogy
 Enhance research/Get past roadblocks Receive StLGS publications
 Obtain discounts on StLGS programs and events Support the society
 Become a volunteer at StLGS Other (explain) _____

Please indicate annual membership level:

- Individual \$40 Family \$45 Friend \$100 Patron \$175 Lifetime \$600
 Paper copy of *StLGS Quarterly* journal \$5 (**All members receive the journal electronically unless separate payment is included for mail delivery of paper copy.**)

Please indicate method of payment:

- Check payable to the St. Louis Genealogical Society is enclosed. MasterCard Visa Discover

Account # _____ Expiration Date: _____

Name (as it appears on card): _____ Security Code (3-digit number on back): _____

Please complete this application and mail with payment to the address below

OR join online at www.stlgs.org

