

DeKalb County Indiana Genealogy Society Membership Form

Date: _____

I am a NEW member _____

I am already a member _____

Dues for year: _____

Membership renewal: _____

DCIGS yearly memberships are January through December. Membership fees are due by February 15.

Amount Enclosed: _____\$10.00 Single Membership _____\$15.00 Family Membership (One Address)

Name: _____

(Women-please include maiden name)

Address: _____

City: _____

State: _____ ZipCode: _____

Telephone Number: (_____) _____

Email Address: _____

Volunteer your talents. List areas you would be interested in serving the Society.

DeKalb County Names I am researching:

List any other surnames you am researching below:

Name - County - state

YES of NO (circle one)

I want my name, address, telephone number, e-mail, surnames, and family charts kept in an active file by the DeKalb County Indiana Genealogy Society so that the public can access and copy.

I would like to see the following types of articles in the Genealogy Newsletter:

Please mail your payment to:

DeKalb County Indiana Genealogy Society

Attention: Membership

P. O. Box 6085

Auburn, Indiana 46706