

**Franklin County Genealogical and Historical Society  
Membership Application and Renewal**

\*\*\*\* Membership to the Society by calendar year Jan. 1st. - Dec. 31st. \*\*\*\*

**Attention Life Members: Please answer the question about OGS membership and return to FCGHS**

**Primary:** Name \_\_\_\_\_ Maiden name \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip + 4 \_\_\_\_\_

**Associate:** (Living at same address) Name \_\_\_\_\_

E-mail address \_\_\_\_\_ Phone no. \_\_\_\_\_

**\*If you wish to continue receiving the newsletter via postal service please remit \$5.00 extra to cover postage, envelopes, etc**

Member of OGS (Ohio Genealogical Society) Yes \_\_\_\_\_ No \_\_\_\_\_ OGS membership # \_\_\_\_\_  
Please send my newsletter (Franklintonian) to the above listed e-mail address Yes \_\_\_\_\_ No \_\_\_\_\_ (see below fee to mail)  
Permission to publish your name, address & e-mail address in our Membership Directory & Web Site Yes \_\_\_\_\_ No \_\_\_\_\_

Categories of Membership

\$ 15.00 Primary (**Individual annual dues**) New \_\_\_\_\_ Renewal \_\_\_\_\_ \$ \_\_\_\_\_  
 \$ 5.00 Receive "Hard Copy" of Franklintonian (covers cost of postage, envelopes, paper, ink) 4 issues \$ \_\_\_\_\_  
  
 \$ 3.00 Associate each (**living at same address**) New \_\_\_\_\_ Renewal \_\_\_\_\_ \$ \_\_\_\_\_  
 \$ 50.00 Patron (**Your dues help pay Society expenses, receive one hour of free research**) \$ \_\_\_\_\_  
 \$300.00 Life (**Lifetime Membership**)  \$500.00 Joint Life (**Primary and Associate lifetime**) \$ \_\_\_\_\_  
 Contribution:  Open \$ \_\_\_\_\_  
 Restricted: \_\_\_\_\_  Endowment  Other: Please state interest \_\_\_\_\_  
Total Payment Enclosed \$ \_\_\_\_\_

**Surnames/Places of Families I am researching**

\_\_\_\_\_

Query I wish to submit to the Franklintonian is: \_\_\_\_\_

\_\_\_\_\_

**Gift Membership Form**

Primary \$15.00  Associate membership (Same address) \$18.00  
To: Gift Member's Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-mail address \_\_\_\_\_

From: Your name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

We can send a gift certificate to you to give to the gift member, or we can send it directly to the gift member. Please check your preference.  Gift certificate to you.  Gift certificate to gift member

Mail membership form and payment to: Franklin County Genealogical and Historical Society  
3378 Park Street Suite D  
Grove City, Ohio 43123-2630

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