



CENTRAL TEXAS GENEALOGICAL SOCIETY
APPLICATION FOR NEW MEMBERSHIP
-or- RENEWAL OF MEMBERSHIP

Please complete the information on the form and return it along with your dues:
\$25 Individual / year; add \$10 for each additional member in same household
\$35 Individual w/ one printed quarterly/year; \$10 for each additional member in same household
\$50 Fellow. \$100 Patron. \$10 Out-of-State Research Member

Please contact Membership Chair Linda Jordan at membership@ctgs.org with any questions.

Full Name: _____

Maiden name: _____

Street Address/PO Box: _____

City, State, Zip+4: _____

Telephone: _____

E-mail: _____

Current or former occupations and interests: _____

Surnames you are researching:

1 _____

3 _____

2 _____

4 _____

yDNA group _____

mtDNA group _____

Full Name of Spouse (if also joining): _____

Spouse's surnames: _____

CTGS Quarterly delivery preference: U.S. Mail Electronically

If electronically, please create a CTGS user name and password (at least 6 characters).

User name _____ Password _____

Signature: _____

Please Return To: Linda Jordan, Membership Chair – Central Texas Genealogical Society
West Waco Library & Genealogy Center, 5301 Bosque Blvd. #275, Waco, TX 76710