

**APPLICATION FOR MEMBERSHIP
(PLEASE PRINT)**

NAME _____ **MAIDEN NAME** _____

STREET _____

CITY _____ **STATE** _____ **ZIP** _____

NEW _____ **RENEWAL** _____ **CHANGE OF ADDRESS** _____

NAMES RESEARCHING _____

SIGNATURE _____

INDIVIDUAL _____ **\$15.00**

SPOUSE OF MEMBER. _____ **\$1.00**

LIFE MEMBER _____ **\$150.00**

INSTITUTIONS _____ **\$5.00**

**MAKE CHECKS PAYABLE TO:
GREENE COUNTY H&G SOCIETY
TREASURER: TERRY KRUCKEBERG
P.O. BOX 137
CARROLLTON, IL. 62016-0137**