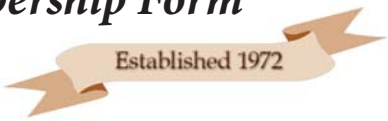


Membership Form



Discover Your Ancestry



West Valley Genealogical Society

12222 N. 111th Avenue
Youngtown, AZ 85363-1225
623-933-4945 - <http://www.azwvgs.org>
WVGS is the number one Genealogical Library in Arizona
we are a 501(c)(3) non-profit organization.

Membership year is Jan. 1 to Dec. 31 for all members. RENEWALS no later than Jan. 31 of the following year.

- New Member
- Renewal
- Reinstatement (After February 1st only)
- Half Year Member

Will you be age 90 this year? Yes No? We'd like to add your choice of a book to the Library. Birth year please _____

Please Print Clearly And Completely:

Date: _____

1. First Name _____ Last Name _____ Membership # 1222 _____

2. 2nd Person's First Name _____ Last Name _____ Membership # 1222 _____

Address: _____ City: _____ State _____

Zip Code plus 4 _____ + _____

Primary Phone Number _____ Secondary Phone Number _____

#1. Email Address _____ Tidbits by: email U.S.P.S

#2. Email Address _____ Tidbits by: email U.S.P.S

Former Occupation(s):

Person #1 _____ Retired: Yes No

Person #2 _____ Retired: Yes No

We are a Volunteer Society. Please indicate which of the following is of interest to you.
(if you are currently volunteering, please disregard this section)

Interests, Talents or Hobbies:

- Publications
- Publicity
- Fund Raising
- Mailing
- Speakers Bureau
- Annual Seminar
- Salt Lake City Tour
- Help at Monthly Meetings
- Instructor-Presenter
- Library Aide
- Shelf Reading
- Library Cleaning Team
- Property Management
- Filing/Typing
- PC Tech
- Programmer
- Assistant Webmaster
- Data Base/File Management (some help can be done from home)
- Other _____

Make Check Payable To WVGS or Sign Up Online at www.azwvgs.org

Individual \$40.00 Couple \$70.00 Junior \$20.00 (Ages 12-18)

Half Year (New Members only after 7/1)

Desert Tracker first class mail \$8.00 (Publications are sent bulk mail rate unless checked. Only first class mail is forwarded.)

Donation: Library/Facilities A mount \$ _____

Total Amount Enclosed: \$ _____

For use of Membership Registrar Only:

Date: _____ Check Number _____ Cash: _____ Receipt Number _____

Member ID# _____