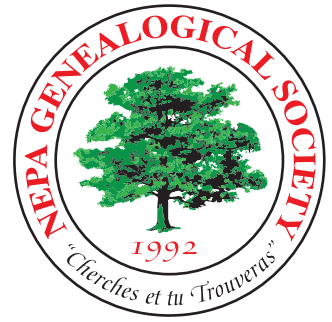


Northeast Pennsylvania Genealogical Society

Membership Application



Please print or type

Date _____ New Renewal (check one)

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____

Email _____

TYPE OF MEMBERSHIP (please check)

Individual \$35 per year Ind. Contributing \$60 per year

Family \$50 per year Lifetime Membership \$500

(includes 2 adults and children age 12-17 residing at the same address.)

Name of 2nd Adult: _____

Name of Child _____ Name of Child _____

NEPGS cannot accommodate children under the age of twelve.

Please make checks payable to: NEPGS
P.O. Box 1776, Shavertown, PA 18708
or visit www.nepgs.com to make a secure payment through Paypal.

I wish to volunteer. Please call: _____

Records Preservation

Research Staff

Greeter/Reception

Transcription

* NEPGS imposes a fee on funds submitted via check and not paid on presentment or an electronic funds transfer payment and not credited on the transmission of \$25.00*

OFFICE USE ONLY

Date Paid: _____ Amount: _____ Cash Check # _____ Paypal

Effective 10/2017