



TOPEKA GENEALOGICAL SOCIETY

PO Box 4048, Topeka, KS 66604-0048

785-233-5762

www.tgstopeka.org

MEMBERSHIP APPLICATION / RENEWAL FORM

OR sign up on our website by clicking on Members – Join Us and follow the guidance.

MEMBERSHIP WILL BE VALID FOR 1 YEAR FROM JOIN OR RENEWAL DATE

Date _____

MEMBER INFORMATION:

Member #1:	Member #2 (for Household memberships)
NAME:	NAME:
Email:	Email:
Cell phone: ()	Cell phone: ()
Share contact info with TGS members? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> New member <input type="checkbox"/> Renewing member	Share contact info with TGS members? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> New member <input type="checkbox"/> Renewing member

(Note: please provide your current email address (print legibly), as we are relying increasingly upon electronic means of communication.

HOUSEHOLD CONTACT INFORMATION:

Address _____
 Number Street City State Zip+4

Home Telephone: () _____

New Member: How did you learn about TGS? _____

MEMBERSHIP RATES:

- INDIVIDUAL \$ 30.00
- HOUSEHOLD \$ 40.00 (2 members living at same address)
- STUDENT \$ 10.00 (Student eligibility limit is 25 years of age)

OPTIONAL DONATION* _____ \$

Printed/Mailed *TGS News & Views* add \$10.00 (*TGS Quarterly* publication is on hold for a year)

TOTAL ENCLOSED: _____ (Make checks payable to TGS)

*Donations in addition to membership dues are welcome and are tax deductible as provided by law.

All membership information is confidential and WILL NOT be sold or distributed by TGS

This section for office use only:

Accepting Librarian Signature

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Type: _____
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Treasurer: _____
Publications: _____
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