



Florida Genealogical Society - Tampa

Membership Application

Member Information

Last Name	First Name	Middle Name	Membership Plan <input type="checkbox"/> New <input type="checkbox"/> Renewal <input type="checkbox"/> Individual - \$20 <input type="checkbox"/> Family - \$25 <input type="checkbox"/> Student - Free
Address		Apt/Suite	
City	State	Postal Code	
Tel: Home	Tel: Cell		
Email			
Referred By:			

Additional Family Member Information

(Family Membership Plans only)

Last Name	First Name	Middle Name
Tel: Home	Tel: Cell	
Email		

FGS's operating year is Jan 1 – Dec 31. Current year payments must be received by February 15 in order to receive full annual benefits. Renewal notices are sent out via email in November.

Make check payable to the **Florida Genealogical Society** and mail to:

Florida Genealogical Society, Inc.
P. O. Box 18624, Tampa, FL 33679-8624

Please promptly notify FGS of any change of phone, address or e-mail address, to ensure that you are able to receive notifications via e-mail or phone of meetings in a timely manner. You may update your contact information directly on the website (www.fgstampa.org) or you may send changes to info@fgstampa.org.

I give permission to be included in a membership directory.

You can modify these settings on your profile on our website. Only your name is included in the membership directory and accessible to members only.

Yes No

Applicant's signature

Date

Payment Information

This section is to be completed by the Florida Genealogical Society – Tampa Treasurer and Membership Committee

Method <input type="checkbox"/> Check <input type="checkbox"/> Cash <input type="checkbox"/> Credit Card (via Stripe)			
Date Received	Amount	Check Number	Added to Website