



SMCGS
MEMBERSHIP APPLICATION

DATE _____

[] NEW [] RENEWAL [] RETURNING

NAME

First Middle Last

ADDRESS _____

No. and Street

City State Country/Zip

PHONE _____

E-MAIL Please print _____

HOW DID YOU HEAR ABOUT US? _____

MEMBERSHIP

Member support is essential for SMCGS to fulfill our commitment to preserve and index local records and to bring quality genealogical education and resources to the community. SMCGS is a 501(c)(3) organization. Contributions, minus the value of any gifts received, are tax deductible to the full extent provided by law.

Member emails are added to the SMCGS email list for notification of meetings, seminars, workshops/classes, and newsletters.

Individual: [] One Year \$30 [] Two years \$55 [] Student \$20 (show valid student ID)
Individual Life: [] Age 30-39 \$400 [] Age 40-49 \$350 [] Age 50-59 \$300 [] Age 60+ \$250
Family (two people): [] One Year \$40 [] Two Years \$75 2nd person name _____ email _____

Donations: [] I would like to make an additional donation to support SMCGS.
[] \$30 [] \$50 [] \$75 [] \$100* [] Other amount \$ _____
*Donations of \$100 or more receive a complimentary SMCGS tote bag.

Newsletter: The newsletter is available on our website for members OR it can be mailed for an annual fee of \$15.

Matching Gifts: [] Yes, I'll ask my HR Department for a matching gift form & mail to SMCGS, or to membership@smcgs.org.

Volunteer: [] Yes, please contact me about volunteer opportunities. [Thanks! It's a great way to meet others!]

Payment:
Membership Dues \$ _____
Mailed Newsletter _____ at \$15 each per year \$ _____
Additional Donation \$ _____

TOTAL: \$ _____

->PAY by PAYPAL, go to: www.smcgs.org/membership

->PAY by check, make check payable to SMCGS and mail to:
SMCGS Attention: Membership
PO Box 230
San Mateo, CA 94401-0230

THANK YOU