

Virginia Beach Genealogical Society

Membership Application

Name: _____

Date: _____

Membership type: Individual \$25 Household of two \$35
(Dues cover Sept – Aug)

are you a: New Member Renewing Member

Contact information:

(If you are renewing, only changed information needs noted)

email: _____

phone: _(_____) _____

address: _____
street

city, state, zip+4

Check here if you want to share your skills and talents with the society and would like someone to contact you.

Options to submit your application:

email: membership@vbgsva.net

mail: Virginia Beach Genealogical Society

P.O. Box 62901, Virginia Beach VA 23466-2901

checks are made out to Virginia Beach Genealogical Society

For Treasurer use:

Check #: _____

Amount: _____

Cash: _____

Date Rec'd: _____