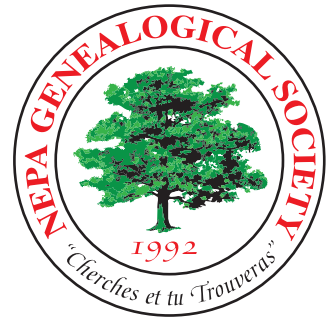


Northeast Pennsylvania Genealogical Society

Membership Application



Please print or type

Date _____ New Renewal (check one)

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____

Email _____

TYPE OF MEMBERSHIP (please check)

Individual \$40 per year

Contributor \$100 per year*

Family \$60 per year

Benefactor \$250 per year**

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

*Includes two hours of research services and ten images.
** Includes four hours of research services and twenty images.
NEPGS Collections Only

Name of Adult 2: _____

Name of Child _____

Name of Child _____

NEPGS cannot accommodate children under the age of twelve.

Individual Life Member \$1,000

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