

Family History Society of Arizona

www.fhsa.org

Membership & Renewal Form

Membership year: 1 January to 31 December each year



Mail to:
FHSA Membership
P.O. Box 63094
Phoenix, AZ 85082-3094

- () New () Renewal
() Individual \$20.00
() Family \$25.00
() *Newsletter extra charge \$15.00
() Outside USA \$27.00
Make check payable to FHSA
Check #
Cash

* Newsletter charge is for only those members who have elected to receive their newsletter in black and white through the US Postal Service. For members with Web access, there is no newsletter charge.

This section to be completed by Individual Members

Name:
Address:
City:
State: Zip + 4:
Phone (include area code):
E-Mail:

Please check your Chapter:
Daytimers Paradise Valley
East Valley Scottsdale
Fountain Hills Tempe
Glendale At Large (no meeting)

This section to be completed only for an additional Family Member (if any)

Name:
Address: same address as above.
Phone (include area code):
E-Mail:

Family Member
From list above please indicate your Chapter:

The following information to be completed for New Members Only

Name Tag:
Additional Family Member
Name Tag:

Surnames Researching:

The following information to be completed by all

May we include your information in a FHSA Chapter (printed) Directory with other FHSA Members?

Individual Member Yes No (Circle your answer)

Family Member Yes No (Circle your answer)

Remember: All FHSA members are welcome to attend any Chapter's meeting at any time. Please check our website for information on speakers, topics, and locations.

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