



**Easterling Family Genealogical Society, Inc.  
1124 Pearl Valley Road  
Wesson, MS 39191**

**Membership Application**

**August 1, 2008 - July 31, 2009**

Member # \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Birthday \_\_\_\_\_ Anniversary \_\_\_\_\_

I would like to be added to our Family Reporter List: Yes \_\_\_\_ No \_\_\_\_

I prefer to be contacted by: Telephone \_\_\_\_\_ or email \_\_\_\_\_

Please credit me as follows: Renewal \_\_\_\_ New \_\_\_\_

Annual Membership \$20.00 \_\_\_\_\_

Life-Time Membership \$150.00 \_\_\_\_\_

General Fund Donation \_\_\_\_\_

\* Special Research Fund \_\_\_\_\_

\* Endowment Fund \_\_\_\_\_

\* These are restricted funds. (Endowment fund established to ensure perpetuity of our Family organization.)

(Life-Time Members/Life Members, please disregard the membership section of this notice.)

I certify that I am a resident of the United States, its Territories or Possessions and am of the **EASTERLING** bloodline or Married Thereto. I understand that as a member, I have all the rights and privileges of membership.

Date \_\_\_\_\_ Signature \_\_\_\_\_

Please make checks payable to EFGS.