

RETURN APPLICATION TO: B. J. Ferguson, President CFSNA; 192 Hawthorne Hill Rd ; Jasper, GA 30143

For Secretary's use: Member Number \_\_\_\_\_ Date Joined \_\_\_\_\_



# Clan Fergusson Society of North America

## APPLICATION FOR MEMBERSHIP

I hereby apply for membership (or reinstatement of former membership) in the CFSNA as a:

Enclosed

\_\_\_\_\_ Reinstated Member \$30.00 \$ \_\_\_\_\_  
(include membership number if known)

\_\_\_\_\_ Regular Member \$35.00 \$ \_\_\_\_\_  
(includes spouse and children under 18)

\_\_\_\_\_ Associate Member \$35.00 \$ \_\_\_\_\_  
(not a FERGUSSON/SEPT but have a genuine interest in CFSNA)

\_\_\_\_\_ Life Member (under age 60 - \$500; age 60 and over - \$300) \$ \_\_\_\_\_

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

Name (please print) Mr. Mrs. Ms. \_\_\_\_\_

Home Address \_\_\_\_\_ Phone \_\_\_\_\_  
(street & number) (include area code)

\_\_\_\_\_ Zip \_\_\_\_\_  
(city, state or province)

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_

Occupation \_\_\_\_\_ e-mail \_\_\_\_\_

Business Address \_\_\_\_\_

\_\_\_\_\_ Business Phone \_\_\_\_\_

Spouse Full Name (with maiden name if applicable) \_\_\_\_\_

Names and birth dates of children \_\_\_\_\_

Would you like to become a volunteer in the CFSNA?

If your surname is not one of those eligible for membership, please explain your relation to a direct ancestor of eligible name:

\_\_\_\_\_

Sponsor \_\_\_\_\_ CFSNA Secretary \_\_\_\_\_

Please list on the reverse side the names and addresses of others who might be interested in joining the

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