

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

## Membership Application

### PATRON MEMBER

Are you eligible?

Eligibility for Patron Membership status requires forty cumulative years of active membership. Active membership is defined as "dues paid". The years of active membership do not have to be consecutive. Gaps in membership are permitted. The key is the TOTAL number of years of active membership.

Use the formulas below to determine your eligibility. (Entries in these fields are required).

Contact the CFSNA Secretary if you have questions about any of the required information below.

\* Denotes required information

\*J = Date Joined CFSNA

\*R = Date Patron Status Requested

\*N = J - R (Number of membership years not counting gaps in membership, if any)

\*G = Gaps in Membership (number of years in a non-payment status)

\*A = N - G (Total active membership years; must equal 40 years or greater to qualify)

\*Name (as you wish it to be printed on your Patron Membership certificate): \_\_\_\_\_

Membership Number \_\_\_\_\_

\*Home Address \_\_\_\_\_ \*Phone \_\_\_\_\_ Phone (cell) \_\_\_\_\_

(street & number)

(include area code)

Zip \_\_\_\_\_

(city, state or province)

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

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

Please include a current photograph of yourself for CFSNA records.

Interested in becoming a Clan Fergusson volunteer? \_\_\_\_\_

If so, please circle your area(s) of interest: Secretary, Assistant Secretary, Membership, Treasurer, Assistant Treasurer, Awards, Regional Vice-President, Assistant Regional Vice-President, Convener, Genealogist, Assistant Genealogist, Marketing, Publications, The Bee Line Editor, Assistant The Bee Line Editor, Webmaster, Assistant Webmaster, Historian, Merchandise, Assistant Merchandise, Scholarship, Other \_\_\_\_\_

The Executive Committee of the CFSNA will review your application for Patron Membership status. You will be contacted as soon as a determination has been made concerning your eligibility.

Comments? \_\_\_\_\_

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