



# Membership Form

PLEASE PRINT OR TYPE

PLEASE CHECK ONE: RENEWAL

NEW MEMBERSHIP  FOR YEAR OF 2012

(surname)

(given name)

(middle name)

Name(s):

(Spouse's) Maiden name:

Address:

City/State/Zip:

Country:

Phone (day): (include area code)

Phone (evening): (include area code)

Phone (mobile) (Include area code)

E-mail address:

Current/former occupation:

Additional Address

Indicate months at additional address:

PLEASE SELECT A MEMBERSHIP LEVEL:

INDIVIDUAL \$25

SUSTAINING \$60

PATRON \$240

FAMILY \$35

ENDORSING \$120

DONOR \$350

PLEASE MAKE CHECKS PAYABLE, IN US FUNDS, TO **JGS OF CLEVELAND**. TAX DEDUCTIBLE IF YOU ITEMIZE FEDERAL TAX DEDUCTIONS.

MAIL CHECK AND THE MEMBERSHIP FORM TO:

**PHYLLIS BRAVO, VP - Membership, Jewish Genealogy Society of Cleveland**

**1592 South Belvoir Blvd., South Euclid, OH 44121**

[www.clevelandjgs.org](http://www.clevelandjgs.org)



# Membership Form

PLEASE PRINT OR TYPE

## Research Information

Your name(s):

(surname)

(given name)

(middle name)

E-mail address:

**MAY WE INCLUDE YOUR RESEARCH INFORMATION IN A MEMBERS ONLY LIST ON THE CJGS WEB SITE SO OTHER MEMBERS RESEARCHING THE SAME NAMES CAN CONTACT YOU?**

YES  NO

**Whom are you researching? Please print clearly. Use Capital letters.**

**Surname**

**Given & Middle Names**

**Shtetl**

**Country**

**Other genealogy related interests:**

<b>Interest in JGSC activities:</b>	<b>Program</b>	<b>Library</b>	<b>Newsletter</b>	<b>Photographer</b>	<b>Website</b>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>