Please be sure to include legible email on form

Virginia Great-Great Granddaughters Club
Membership Application

____ I am a new member
____ This is my yearly renewal

Applicant's Name:_____

Home Address:_____

_____

Telephone Number:_____

Email Address: (Required for correspondence) _____-

Chapter Name:_____Chapter Location: _____

Name of Great-Great Grandfather:_____

Confederate Military Unit(s) of Great-Great Grandfather: _____

_____
As listed on membership certificate. **If new member**, *you must provide pages 1 and 4* of approved Membership or Supplemental application

Date of Birth:_____ Date of Death:_____

Place of Burial and location: _____

Type of Marker: _____

_____

Applicant's Signature _____Date_____

Chapter Registrar's Signature Date. _____Date_____

New members: Mail two copies of this completed form and a check for $10.00 payable to: Treasurer, Virginia GGGD Club, and mail to:

Ms. Therese DeSanto
633 Makers Way
Martinsburg, WV 25405-4319

Annual dues $10.00
Payable by June 1 each year
Dues include Division and General
Contact: ourfamilylegacy@aol.com

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