



ABBOTSFORD GENEALOGICAL SOCIETY
Membership Application
www.abbygs.ca

PERSONAL INFORMATION:

Name(s): _____ Phone: _____

Address: _____

City: _____ Prov/State: _____

Email: _____ Postal Code: _____

ANNUAL MEMBERSHIP INFORMATION:

Membership Year: _____

Single \$24; Family \$36; payment due by January 31; runs from January to December; make cheques payable to Abbotsford Genealogical Society 32388 Veterans Way The Reach Abbotsford BC V2T 0B3

Single Family

Membership Number: _____

Dues: \$ _____/Year

Paid by Cheque No. _____

FOR OFFICE USE ONLY: added to Membership List by _____ **Date:** _____

MEMBERSHIP and CIRCULATION LISTS: the AGS maintains a Membership List for ADMINISTRATION PURPOSES ONLY. The Society also maintains a Circulation List, which is made available to members only. The privacy laws of British Columbia require the AGS to obtain permission from its members before we add their personal information to our Circulation List. All personal information will be added to the Circulation list unless you mark the boxes below. By signing this form you (i) authorize the AGS to add your personal information to our Membership List; and (ii) agree to protect the privacy of all personal information on the Circulation List.

Name Membership No. Telephone No. Email City/Town

SIGNATURE: _____

DATE: _____