

Oakland County Genealogical Society

P.O. Box 1094 Birmingham, Michigan 48012-1094
http://www.ocgsmi.org info@ocgs.com

MEMBERSHIP APPLICATION / RENEWAL

Membership is for one year from your anniversary date, with a 30 day grace period, and includes four issues of *Acorns to Oaks*. Our online member directory is available to members only and includes names, addresses, phone numbers and e-mail addresses as provided on this form. To exclude any or all information check the appropriate boxes. Your e-mail may be used for occasional communication regarding the Society, but will never be sold, shared, or communicated in any way to any third party.

DATE: _____ OCGS MEMBER # FOR RENEWAL: _____ OR NEW

NAME(S): _____

STREET: _____

CITY: _____ STATE: _____ ZIP + 4: _____

PHONE: _____ Omit from Directory

E-MAIL: _____ Omit from Directory

Omit me from the directory

To receive OCGS mailings, including the *Quarterly* while at a seasonal address, please provide address and dates; the Post Office does not forward Bulk Mail.

SEASONAL ADDRESS: _____ PHONE: _____

CITY: _____ STATE: _____ ZIP + 4: _____

START DATE: _____ END DATE: _____

SASE enclosed, mail my membership card. I will pick up my card at a meeting I don't need a membership card

**OCGS thanks you for your gift to
preserve and improve access to
records**

US Address \$25.00 _____

Outside the USA: \$25.00 _____
Acorns to Oaks is sent by
email to members outside the USA

Local Level

Ruth S. Kennedy Oakland County Records Preservation Fund

Kennedy Fund _____

State Level

Genealogy Collection at the Michigan Historical Center

Abrams Genealogy Collection _____

National Level

Malcolm H. Stern NARA Gift Fund

Stern NARA Gift Fund _____

TOTAL _____

Checks Payable to O.C.G.S. (US Funds only)

QUERY

Members may submit free queries of up to 50 words each for the *Quarterly*, which will be printed, up to three per issue, as space allows. Use all capital letters for surnames; place maiden name, if listed, in parentheses, ex: Mary (SMITH) JONES. Do not use abbreviations; staff will abbreviate as appropriate. Keep it simple but include a name, date/time period, location and what you are seeking. Spell out months: June, not 6. Use reverse or another sheet for additional queries.

Name: _____ Address: _____

_____ E-mail: _____

Talents and interests

Check areas of interest in which you can help:

You are the Society, and the Society is you. Where are you willing to help?

As Speaker, list topic(s):

Resource Person, for queries or help night. In which areas of research do you have knowledge/expertise?

I can volunteer in these areas _____

- | | |
|---|--|
| <input type="checkbox"/> Publications sales table | <input type="checkbox"/> Financial |
| <input type="checkbox"/> Membership & Registration table | <input type="checkbox"/> Indexing |
| <input type="checkbox"/> Beginner assistance table | <input type="checkbox"/> Proofreading |
| <input type="checkbox"/> Publications committee | <input type="checkbox"/> Publicity |
| <input type="checkbox"/> Hospitality committee | <input type="checkbox"/> Library/archives |
| <input type="checkbox"/> Officer or leadership position | <input type="checkbox"/> Cemetery research |
| <input type="checkbox"/> Transcription of records | <input type="checkbox"/> Website |
| <input type="checkbox"/> Write/Research articles for our Quarterly | <input type="checkbox"/> Book reviews |
| <input type="checkbox"/> Federation of Genealogical Society Delegate | <input type="checkbox"/> Facebook page |
| <input type="checkbox"/> Michigan Genealogical Council Delegate (Lansing) | <input type="checkbox"/> Query research |
| <input type="checkbox"/> Cookies for meeting | |

Program topics of interest to you: _____

Additional comments, suggestions and information: _____
