

Afro-American Historical and Genealogical Society- New England Chapter, Inc.

5 Old Planters Road, Beverly, MA 01915

www.aahgs-ne.org

Membership Application/Renewal

Please print or type **all** information. Missing information and/or an incomplete application causes a delay in the processing of your membership. The AAHGS National and Chapter annual membership dues expire on December 31st. Membership is only granted after all fees are paid.

Check the AAHGS Membership categories for which you are submitting fees. You have the option of paying for multiple years. See bottom of application for payment options.

- Individual National Dues = \$35/year
- Family (2 members) National Dues \$40/year
- Individual Chapter Dues = \$15/year
- Family (2 members) Chapter Dues \$20/year
- National Life Membership (individuals only) \$1,000 (may be paid in three installments within a 3 year period)*

Total Amount enclosed _____ for membership year **January 1st to December 31st 20__**

- New member¹
- Renewal² Include Membership #: _____

Print all information clearly. (Do not leave blank)

Name: _____

Name of Second Family member, if applicable: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Email: _____

- Check here if this is a new address: _____ Email: _____

Please read and check below if you agree to the following:

- I am interested in being contacted for a special project.
- I grant permission to AAHGS & AAHGS-NE to release my contact information to approved initiatives.
- I can accept an electronic version of the AAHGS Newsletter.
- I can accept an electronic version of the AAHGS Journal.
- I can accept an electronic version of the AAHGS-NE Newsletter, Meeting Notices & Meeting Minutes.
- I am willing to serve on a special committee for AAHGS-NE Chapter.
- I give permission to be photographed and agree for any photographs of me to be used in AAHGS Publications, on the Chapter and National websites and on AAHGS Facebook pages.

Indicate Your Payment Method:

- Cash
 - Check
 - Money Order
- Make payable to **AAHGS- NE**
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Mail to: AAHGS-NE Chapter, c/o Stella Pierce, 5 Old Planters Road, Beverly, MA 01915

(Applications and checks mailed to any other address incur significant delays in processing)

¹ First time member applications received before September 1 will receive the next scheduled AAHGS Newsletters and all subsequent issues for the current calendar year. First time member applications received after September 1 are granted membership through December 31 of the next calendar year and will begin receiving the AAHGS' newsletters with the next scheduled mailing of the New Year.

² Renewal applications received after January 31st will begin receiving the AAHGS Newsletters starting with the next scheduled mailing.

*Life Membership payments must be completed within three years of the initial payment

There is a \$35.00 fee for all returned checks.

Allow 8-10 weeks for processing after receipt of your application by Membership Services @ AAHGS-National.

Do not remove: This section for office use only: ID#: _____ N R REN _____

FRD: _____ DMR: _____ DDE: _____ DME: _____

Notes: