

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

[www.aahgs-ne.org](http://www.aahgs-ne.org)

**Membership Application/Renewal - January 1 - December 31, 2023**

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 31<sup>st</sup>. 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.

- Individual National Dues = \$35/year     Family (2 members) National Dues \$40/year  
 Individual Chapter Dues = \$15/year     Family (2 members) Chapter Dues \$20/year  
 Total Individual Dues Enclosed = \$50/year     Total Family Dues Enclosed = \$60/year

- National Life Membership (individuals only) \$1,000 (may be paid in three installments within a 3-year period)  
 Total Enclosed for Life Membership = \$ \_\_\_\_\_

- New member<sup>1</sup>                       Renewal<sup>2</sup>    Include Membership # (if known): \_\_\_\_\_

**Print all information clearly. (Do not leave blank. An email address is required.)**

Name: \_\_\_\_\_

Name of Second Family member, if applicable: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ \*Email: \_\_\_\_\_

- Check here if this is a new address:                      \*Email: \_\_\_\_\_

**Birthday (Month & Day Only)** Member 1 \_\_\_\_\_ Member 2 \_\_\_\_\_

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

- I grant permission to AAHGS & AAHGS-NE to release my contact information to approved initiatives.  
 I can accept electronic versions of Chapter and National Communications and Publications.  
 I want to receive communications from AAHGS-NE about things of interest from other organizations.  
 I am willing to serve on a special committee for AAHGS-NE Chapter.  
 I give permission to be photographed (in person or via Zoom) and agree for any photographs of me to be used in National and Chapter publications, and on AAHGS websites and social media platforms.

**Submit membership applications/renewals as follows:**

Make Checks or Money Orders Payable to **AAHGS- NE**                      **NO CASH PLEASE**

**Mail to: Stella Pierce, AAHGS-NE Membership Chair**

**5 Old Planters Road**

**Beverly, MA 01519-1519**

**Applications/renewals mailed to any other address incur significant delays in processing.**

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

<sup>1</sup> 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 mailing of the New Year.

<sup>2</sup> All Chapter and National communications and publications are transmitted electronically. A hard Copy of AAHGS (National) NEWS is available for \$6.00 each from AAHGS National, P.O. Box 73067, Washington, DC 20056-3067. Hard copies of some AAHGS Journals can be purchased on Amazon. All National newsletters and journals are archived and can be accessed when signed on as a member on the National website. Go to [www.aahgs.org](http://www.aahgs.org) for more details.

**Do not remove:** This section for office use only: ID#: \_\_\_\_\_ N    R    REN \_\_\_\_\_

FRD: \_\_\_\_\_ DMR: \_\_\_\_\_ DDE: \_\_\_\_\_ DME: \_\_\_\_\_

Notes: \_\_\_\_\_