



JUNIOR MEMBERSHIP APPLICATION

Society of Mayflower Descendants in the State of Oregon

JUNIOR:

Junior Full Name _____ Ancestor _____

Address _____

Date of Birth _____ Place of Birth _____

Best Phone Number _____ Best Email address _____

LINEAGE:

Father's Name _____ Date of Marriage _____

Date of Birth _____ Place of Birth _____

Mother's Maiden Name _____

Date of Birth _____ Place of Birth _____

Grandfather's Name _____ Date of Marriage _____

Place of Marriage _____

Date of Birth _____ Place of Birth _____

Grandmother's Maiden Name _____

Date of Birth _____ Place of Birth _____

NOTE: If the Sponsor is not a member of the Oregon Mayflower Society, a copy of their lineage papers must be submitted with this application.

SPONSOR:

Sponsor Name _____ Relation to Junior _____

Sponsor Address _____

Sponsor Phone _____ Sponsor Email _____

Sponsor Colony _____ State No. _____ General No. _____

This completed and signed application should be returned to the Junior Membership Chairman with a fee of six (6) dollars which pays dues from date of acceptance to Junior Membership until the applicant reaches age 26. Lineage documentation connecting the Junior to Sponsor is required. Application for Junior Membership must be made prior to Junior's 18th birthday.

Date _____

Signature of Junior _____

Signature of Sponsor _____