



## Application for Membership

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

I am a current member of the Association of Professional Genealogists National (APG) with dues paid through \_\_\_\_\_, and apply for membership in the New Jersey Chapter of APG (hereinafter referred to as "Chapter"). I have read and subscribe to the by-laws of the Chapter. I understand that annual chapter membership is \$20.00, and is valid through December 31<sup>st</sup> of the current year.

Signature: \_\_\_\_\_

New Member       Renewal

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip + 4: \_\_\_\_\_

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

Payment: Check payable to NJ-APG Chapter  or PayPal  Number of Years (circle choice): 1   2   3

\*If selecting a multi-year membership, note that national membership must be in good standing at all times.

The following information is for inclusion in the Chapter member directory, which is used to promote member services. This directory will be maintained on the Chapter website for public view.

Yes, I want my information to be included on the NJ-APG website       No, do not include my information

Are You Currently Accepting Clients?     Yes     No

Business name (if any): \_\_\_\_\_

Business Address: \_\_\_\_\_ Business Telephone: \_\_\_\_\_

Business Email: \_\_\_\_\_ Website: \_\_\_\_\_

Areas of Expertise/Specialty: \_\_\_\_\_ Regions: \_\_\_\_\_

Services: \_\_\_\_\_

I am interested in volunteering with the Chapter in the following capacity:

Programs     Publicity     Membership     Technology (website & mailing list)     Not sure, but I want to help!

Please return this form with payment via PayPal to [njapgchapter@gmail.com](mailto:njapgchapter@gmail.com) or via check to:

**NJ-APG Chapter  
c/o Joan Betancourt  
10 Lincoln Place  
Freehold, NJ 07728**

For Chapter Use Only:

Dues Received: : \_\_\_\_/\_\_\_\_/\_\_\_\_      Membership Year: \_\_\_\_\_  
 Application Scanned & Added to DropBox: \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Membership Dues Acknowledgement Sent by Treasurer: : \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Date added to NJ-APG Mailing List: \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Date added to online Chapter Member Directory: \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Date invited to NJ-APG Facebook group & Google+ Community: : \_\_\_\_/\_\_\_\_/\_\_\_\_