Afro-American Historical and Genealogical Society, Inc.
P. O. Box 73067, Washington, DC 20056-3067
www.aahgs.org

Membership Application (This application may be duplicated)

Please print or type **all** information. Missing information and/or an incomplete application causes a delay in the processing of your membership. The AAHGS 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 $35/year ❑ Family $40/year ❑ Organization $45/year
❑ Life Membership (individuals only) $1,000 (may be paid in three installments within a 3 year period)*

Amount enclosed _____ for membership year January 1st to December 31st 2019

❑ New member[1] ❑ Renewal[2] include Membership #: _____

Print all information clearly. (Do not leave blank)

Name: _____
Family membership only, full name of one family member: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: _____ Email: _____

❑ Check here if this is a new address:

Please read and complete the information below:
❑ AAHGS Chapter to which you pay dues if applicable. _____
❑ I am Interested in joining a chapter? Yes___ No___
❑ I am interested in being contacted for a special project. Yes___ No___
❑ Check here to grant permission to the Afro-American Historical and Genealogical Society (AAHGS) to release your contact information to AAHGS approved initiatives.

Circle your response to the statement below:
I can accept an electronic version of the AAHGS Newsletter and Journal. **Yes or No**

Indicate Your Payment Method:
❑ Check/Money Order payable to **AAHGS**

❑ Credit Card: American Express, Discover, Master Card or Visa

_____ _____
Credit Card Number Expiration Date (mm/yyyy)

Name as written on credit card:_____

Mail to: AAHGS-Membership; P.O. Box 73067; Washington, DC 20056-3067
(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 Journal and 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 Journal and the AAHGS' newsletters with the next scheduled mailing of the new year.
[2] Renewal applications received after January 31st will begin receiving the Journal and 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

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

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