

## Adelaide Northern Districts Family History Group Inc.

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## Membership Form

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Title		Surname		Member No.	(office use only)			
	Given Names Birth				Date			
Residental Address				State	Postcode			
Postal Address				State	Postcode			
Hom	e Phone Number	Mobile Phone Nu	mber	Legacy User	FTM User			
Email Address			Associate Member		Join Email List			
Y		Y	es/No	Yes/No				
		be bound by the Con		•	-			

Declaration: I agree to be bound by the Constitution and Rules of the Group and realize that my details may be published by the Group either on the Group's computers or in the Group's newsletters or Journal. I include \$30.00 membership fee (or \$15.00 associate membership) with this application and have been informed that membership renewals fall due on the 30th June annually.

Oignataro	Signature	Date
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Bank Details: BSB: 805023 ACC: 04253781

If you wish to register your research interests, please fill form below. (Please use Chapman Code as shown)

Surname	Place	State/County	Country	Period
Smith	Warwick	WAR	ENG	pre 1855