

# The Craco Society



## 2008 Membership Application Form

### Instructions:

Please complete and return this registration form along with a check made out to The Craco Society (Inc.) for the appropriate amount. An acknowledgement will be sent upon receipt of your check and each individual registered will receive a membership card and membership certificate.

Check	2008 Membership Level	Amount
	<b>Individual</b>	\$25
	<b>Household</b> <i>To enroll members of all individuals in a family living at the same address.</i>	\$50
	<b>Family</b> <i>Enrolls members of a family consisting of parents, children and grandchildren regardless of residence.</i>	\$125

Member Name \_\_\_\_\_

Address \_\_\_\_\_ City: \_\_\_\_\_ State/Prov. \_\_\_\_\_

Postal Code \_\_\_\_\_ Country \_\_\_\_\_ Tel. \_\_\_\_\_ Email \_\_\_\_\_

Place of Birth: \_\_\_\_\_ Date of birth: \_\_\_\_\_

**Additional Members:** To register additional members under the Household or Family please provide the information below on each individual; if more space is needed please provide the same information for each individual on a separate piece of paper.

Name _____ Relationship to Member _____
Address _____ City: _____ State/Prov. _____
Postal Code _____ Country _____ Tel. _____ Email _____
Place of Birth: _____ Date of birth: _____

Name _____ Relationship to Member _____
Address _____ City: _____ State/Prov. _____
Postal Code _____ Country _____ Tel. _____ Email _____
Place of Birth: _____ Date of birth: _____

Name \_\_\_\_\_ Relationship to Member \_\_\_\_\_  
Address \_\_\_\_\_ City: \_\_\_\_\_ State/Prov. \_\_\_\_\_  
Postal Code \_\_\_\_\_ Country \_\_\_\_\_ Tel. \_\_\_\_\_ Email \_\_\_\_\_  
Place of Birth: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Name \_\_\_\_\_ Relationship to Member \_\_\_\_\_  
Address \_\_\_\_\_ City: \_\_\_\_\_ State/Prov. \_\_\_\_\_  
Postal Code \_\_\_\_\_ Country \_\_\_\_\_ Tel. \_\_\_\_\_ Email \_\_\_\_\_  
Place of Birth: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Name \_\_\_\_\_ Relationship to Member \_\_\_\_\_  
Address \_\_\_\_\_ City: \_\_\_\_\_ State/Prov. \_\_\_\_\_  
Postal Code \_\_\_\_\_ Country \_\_\_\_\_ Tel. \_\_\_\_\_ Email \_\_\_\_\_  
Place of Birth: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Name \_\_\_\_\_ Relationship to Member \_\_\_\_\_  
Address \_\_\_\_\_ City: \_\_\_\_\_ State/Prov. \_\_\_\_\_  
Postal Code \_\_\_\_\_ Country \_\_\_\_\_ Tel. \_\_\_\_\_ Email \_\_\_\_\_  
Place of Birth: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Name \_\_\_\_\_ Relationship to Member \_\_\_\_\_  
Address \_\_\_\_\_ City: \_\_\_\_\_ State/Prov. \_\_\_\_\_  
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Address \_\_\_\_\_ City: \_\_\_\_\_ State/Prov. \_\_\_\_\_  
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Place of Birth: \_\_\_\_\_ Date of birth: \_\_\_\_\_