



Brookings Area  
Genealogical Society

# BAGS Membership Application Form

Please mail this form and check (do not send cash) to:

BAGS Treasurer, 515 Third Street, Brookings, SD 57006

(Please Print)

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phones - Preferred number(s):

(Home) \_\_\_-\_\_\_-\_\_\_\_ (Work) \_\_\_-\_\_\_-\_\_\_\_ (Cell) \_\_\_-\_\_\_-\_\_\_\_

E-mail \_\_\_\_\_

Individual \$10 annual     New     Renewal

How long have you been doing genealogy? \_\_\_\_\_

SURNAMES you are currently researching or most interested in (limit to 6):

1. \_\_\_\_\_ 4. \_\_\_\_\_

2. \_\_\_\_\_ 5. \_\_\_\_\_

3. \_\_\_\_\_ 6. \_\_\_\_\_

Experiences/talents you are willing to share with the Society:

(Please check as many as appropriate for you)

- indexing     filing     typing     translations     legal  
 researching     financial     speaking     editing     writing  
 other \_\_\_\_\_

I would be willing to serve as an officer or to be on the following committee(s)

- Membership     Publications     Publicity     Programs  
 Historian     Bylaws     Sales     Research  
 I would be willing to speak on (topic) \_\_\_\_\_

For use by BAGS Treasurer only: Date received \_\_\_\_\_