



Please renew by January 1 - Thank you!

## 2012 Membership Form

(US Branch dues are for the calendar year: Jan. - Dec.)

\_\_\_\_ New Member\*

\_\_\_\_ Renewal Member

Gift Membership — Sponsor's Name: \_\_\_\_\_

*\* New Member Applicants: Please check one of the following to confirm your qualification for membership:*

I am a child of a Chisholm       I am married to a Chisholm       I am descended from a Chisholm

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

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

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

Home Phone (& Area Code): \_\_\_\_\_ Work Phone (& Area Code): \_\_\_\_\_

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

**Important:** The US Branch Membership Directory is distributed to Members only.

Would you like your contact information included in the Clan Chisholm Directory? Yes  No

### Annual Membership Dues

<u>Please Indicate Type of Membership Desired:</u>	<u>Annual Dues:</u>	<u>Amount:</u>
____ Regular Member <i>Includes Clan Journal, US Branch Newsletters, Membership Directory, and access to Chisholm Genealogies Database</i>	\$15.00 per person	_____
____ Associate Member <i>Includes US Branch Newsletters and Membership Directory</i>	\$10.00 per person	_____
____ Junior Member (through 18 years of age) <i>Includes US Branch Newsletters. Please include Junior Member's Date of Birth: _____</i>	\$5.00 per person	_____

### -----Donations-----

1. Administrative Fund \_\_\_\_\_
2. Branch Newsletter \_\_\_\_\_
3. CCB-USB Brochure \_\_\_\_\_
4. Clan Chisholm Reference Library \_\_\_\_\_
5. Genealogy Project (US Branch) \_\_\_\_\_
6. Membership Directory (US Branch) \_\_\_\_\_
7. Highland Games at \_\_\_\_\_
8. Renaissance Fund (e.g., New Clan History!) \_\_\_\_\_

Memorial in Remembrance of: \_\_\_\_\_

**Important:** Please complete this section!

**Total:** \_\_\_\_\_

IF I AM UNABLE TO ATTEND THE SOCIETY'S ANNUAL GENERAL MEETING, I ASSIGN PROXY TO (CHECK ONE):

ANOTHER US BRANCH MEMGBER IN GOOD STANDING—MEMBER'S FULL NAME: \_\_\_\_\_

THE US BRANCH CHAIRMAN

PLEASE INCLUDE THE MEMBER'S CITY/STATE, PHONE NO., OR EMAIL ADDRESS: \_\_\_\_\_

YOUR SIGNATURE (REQUIRED FOR PROXY): \_\_\_\_\_ DATE: \_\_\_\_\_