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Clay County Genealogical Society, Inc.
309 West Main Street; PO Box 56
Center Point, IN 47840-0056

Membership Form

Name: _____ **Phone (____)** _____

Address: _____

City: _____ **State:** _____ **Zip:** _____ + _____

Email Address: _____

Check desired type of membership :

Individual \$15.00 Family \$20.00 Benefactor \$25.00

Surnames of Interest: _____

I prefer receiving the newsletter by US Mail _____ or by Email _____

Your membership dues help keep the library open. Thank you for your support.