

Sioux Valley Genealogical Society Membership Application

Today's Date: _____

Name (Full Name): _____

Address: _____

City: _____ State: _____ Zip+4: _____

Phone Number: _____ Email Address: _____

Membership Dues: All dues are for one year, renewable on your anniversary date.

Note: All memberships receive a discount of \$5.00 if Pathfinder is received by electronic download instead of being mailed.

Single Membership with Pathfinder printed and mailed to you _____ \$25.00 _____ E-Mail \$20.00
Family Membership with Pathfinder printed and mailed to you _____ \$30.00 _____ E-Mail \$25.00
Contributing Member with Pathfinder printed and mailed to you _____ \$30.00 _____ E-Mail \$25.00
Patron membership with Pathfinder printed and mailed to you _____ \$55.00 _____ E-Mail \$50.00
Foreign membership with Pathfinder printed and mailed to you _____ \$35.00 _____ E-Mail \$30.00

Surnames you are researching:

Please make check payable to:

SVGS
200 West 6th St
Sioux Falls, SD 57104