



www.scotsofwmbg-va.org

APPLICATION FOR MEMBERSHIP

(One application per applicant ~ please print clearly)

APPLICANT FULL NAME: _____

NAME FOR NAMETAG: _____

HOW DID YOU LEARN ABOUT US? _____

APPLICATION DUES & FEES:

Initiation Fee (all memberships; non-refundable) \$20

Applying as:

___ Individual Active Member \$60 per year

- Active membership shall be limited to individuals born in Scotland or who are lineally descended from a native of Scotland.
- Active members may be elected to the Board of Directors, hold elective office and vote at the Annual General Meeting (AGM).

___ Individual Associate Member \$45 per year

- Associate membership is offered to all persons interested in Scottish history and culture or those who have supported the promotion of Society Objectives.
- Associate members may chair and/or serve on committees.

___ 2nd Active OR Associate Member (same Household) \$35 per year

Current Member's Name (if applicant is spouse/adult child): _____

**Online membership application & payment available at www.scotsofwmbg-va.org
OR mail personal check payable to "SAS-W" to P.O. Box 533, Williamsburg, VA 23187**

Spouse's Name (if not a member): _____

Applicant Address: _____

Email: _____ **Telephone:** _____

Birth Month/Year (MM/YYYY): ___/___ **Occupation:** _____

Volunteer Interest: Events ___ **Scholarship** ___ **Photography** ___ **Other** _____

Skills: Computer ___ **PR** ___ **Financial** ___ **Admin** ___ **Other** _____

Nature of Scottish Ancestry (required for Active membership):

Born in Scotland ___ **Direct Scottish Lineage** ___ *(Use continuation sheet to elaborate)*

APPLICANT SIGNATURE: _____ **DATE:** _____

