An die
Pfälzisch-Rheinische Familienkunde e.V.
Rottstrasse 17 (Stadtarchiv)

6	7	06	1 l	Lud	wig	gsh	afen

Interne Vermerke:
Mitgliedsnummer: PRFK
Schatzmeister:

Membership Application

I apply for membership in the Pfälzisch-Rheinische Familienkunde e.V with effect from 1. January 20I acknowledge their status and commit myself to pay the membership fees on time. The membership fee is currently 40,- € / 60 US\$. I agree to allow the publication of this data (without bank data) in the media of the association (magazines, books or electronic media such as Internet Database (available only to members)). This consent form, I may at any time revoke. The revocation must be sent in writing to the above address.							
willing to the above address	•						
Title, First name(s), Surname							
Street and house number							
Zip Code, Town / City							
Country							
Profession							
Date of birth, Place of birth							
Telephone, Fax							
Email – Address							
Homepage <u>ht</u>	<u>ttp://</u>						

I will transfer the membership suscription to the Paypal- account: order@prfk.org or send a check for 50,- US-Dollar with an added 15,00 US\$ for bank charges.

"who does reseach what?"

A- Räumliche Forschungsgebiete (Emigration and Immigration areas)):	Research areas (Names of places)*);					
B- Family names in research:	Research areas (Names of families) *);					
C- What's in the planning stage?:						
D- I use a computer	[] yes [] no					
E-Which genealogy program(s) do you use?						
I agree with the publication of the above data (addres and research data) in the media (magazines, books and electronic media) of the association.						
and the first that the contract.	[] yes []no					
I answer questions in englisch in french	[] yes []no [] yes []no [] yes []no					
I have created an ancestral top list:	[] yes []no					
I've made available this ancestral top list to the association	[] yes []no					
I've published/posted:						
I have the following suggestion:						
Place D	rate Signature					
With the assuration of my genealogic inhar	itance is mandated:					
Date: Name:						
Address:						

*) Eingabemuster: Familienname, Familienname, Familienname (Ortsname);
Familienname (Ortsname, Ortsname);
Entsprechend bei Forschungsgebieten