

Date: _____



SOCIETY OF MAYFLOWER DESCENDANTS
IN THE STATE OF OHIO

State Jr. No: _____

Colony: _____

Junior Membership Application, Birth to 18th Birthday

Name of applicant			
Street address			
City and state		Zip (9 digits)	
Phone number			
Date of birth		Email	
Place of birth - city/st		Zip (9 digits)	
Sponsor's name		Gen #	State #
Sponsor's address			
City and state		Zip (9 digits)	
Sponsor's Colony	<input type="checkbox"/> CIN <input type="checkbox"/> CLE <input type="checkbox"/> COL <input type="checkbox"/> TOL <input type="checkbox"/> WR <input type="checkbox"/> N/A		
Sponsor's Email			
Relationship of sponsor to applicant	<input type="checkbox"/> Parent <input type="checkbox"/> Grandparent <input type="checkbox"/> Great Grandparent <input type="checkbox"/> Aunt <input type="checkbox"/> Uncle <input type="checkbox"/> Great Aunt <input type="checkbox"/> Great Uncle <input type="checkbox"/> Cousin		
Parents (if not sponsor)			
Parents' email address			
Name of Mayflower Ancestor (one only)			

Send completed application and \$10.00 fee payable to Society of Mayflower Descendants to:
 Todd Reel
 873 Wheat Ridge Rd
 West Union, OH 45693-8932
 toddreel@hotmail.com

The application fee for Junior Membership shall be ten dollars (\$10.00) for each child.
 There shall be no annual dues.
 Upon attaining the age of eighteen years, all Junior Members may become Active Members of the Society of Mayflower Descendants in the State of Ohio by complying with the rules of membership and submitting a formal application for approval by the Historian General.

All materials will be sent directly to the child unless otherwise requested.