

The Leftwich Historical Association, Inc.

MEMBERSHIP APPLICATION FORM

(Please print all information and send to the address on page 2)

Name _____ Nickname _____

Place of Birth _____ Date of Birth _____

Spouse (Maiden Name) _____ Nickname _____

Place of Birth _____ Date of Birth _____

Place of Marriage _____ Date of Marriage _____

Your Address:

City _____ State _____ Zip Code _____

Telephone _____ Cell _____ E-Mail _____

Occupation (before/after retirement) _____

Please list your children: (include name, nickname, birth date & place and spouse (if applicable)).

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____

Brothers/Spouses:

Sisters/Spouses:

- | | |
|----------|-------|
| 1. _____ | _____ |
| 2. _____ | _____ |
| 3. _____ | _____ |
| 4. _____ | _____ |
| 5. _____ | _____ |

Pease list your Leftwich family line of for the Association’s genealogical records. Start with your parent [1st generation], and their parents [2nd generation] and so forth. List all you know including birth dates where known. Attach additional genealogy information if available. Do not send original documents.

Generation

| | | | | |
|----------------------|-------|-----------------|-------|-----------------|
| 1 | _____ | b. _____ | _____ | b. _____ |
| 2 | _____ | b. _____ | _____ | b. _____ |
| 3 | _____ | b. _____ | _____ | b. _____ |
| 4 | _____ | b. _____ | _____ | b. _____ |
| 5^t | _____ | b. _____ | _____ | b. _____ |
| 6 | _____ | b. _____ | _____ | b. _____ |
| 7 | _____ | b. _____ | _____ | b. _____ |
| 8 | _____ | b. _____ | _____ | b. _____ |

I would be interested in volunteering my services to the work of The Leftwich Historical Association by serving on one of the following committees:

| | | |
|---|-------------------------|-------------------------|
| computer ____; | research ____; | census ____; |
| family reunion ____; | newsletter ____; | membership ____; |
| cemetery ____; other special interests _____. | | |

May we have your permission to include your telephone number and e-mail address in the LHA Membership Directory on the LHA web site and printed version? Yes ___ No ___
(Please note that the LHA web site is password protected: Your information will be used only for official business of the LHA.

Please enclose a check in the amount of \$15 for annual dues made payable to The Leftwich Historical Association, Inc. and mail to:

Shirley Greer, Membership Chair
The Leftwich Historical Association, Inc.
16522 Patrick Henry Hwy.
Roseland, VA 22967