



Polish Genealogical Society of New York State Membership Application

Name _____ Date _____

Address _____

City _____ State _____ Zip _____ - _____ Phone _____

E-Mail address _____

New Member or Renewal? _____ How did you hear about us? _____

Can you read a foreign language? Yes / No List Language(s): _____

Please Indicate Your Choices:

I **DO / DO NOT** want my surname information published on pgsnys.org.

I **DO / DO NOT** want my contact information made available to our membership

Choose one option only: I want to receive the *Searchers* newsletter **IN PRINT / BY EMAIL** (indicate your preferred email address for delivery, if different from above: _____)

Circle selected membership: **US** **\$20**
Canada & Overseas **(USD) \$20 w/ emailed newsletter;**
\$30 w/ printed newsletter

I would like to include a tax-deductible donation of \$ _____

Please make check or money order payable to **PGSNYS**.

Mail check and application to: **PGSNYS**
Attn: Membership Committee
P.O. Box 984
Cheektowaga, NY 14225

The surnames provided below may be posted in the Surname Database on our website (www.pgsnys.org) and is made available to our membership.

Surname	Province (Wojewodztwo)	County (Powiat)	Village (Wies)	Parish (Parafia)	City/State Settled US	Date of Arrival

The Polish Genealogical Society of New York State (PGSNYS) is registered as a 501(c)(3) Federal tax-exempt organization.
 Contributions to the PGSNYS are tax-deductible to the extent permitted by law.