



Clan Fergusson Society of North America

APPLICATION FOR MEMBERSHIP

(Use this form when *not* using the online prorated form or the online annual subscription form. List of eligible names and all form types are available in the membership area of the CFSNA website at www.cfsna.net)

I hereby apply for membership in the Clan Fergusson Society of North America as a:

___ Regular Member (\$10.00 of the amounts shown below consists of a one-time processing fee)
(Membership includes spouse and children under 18)

(Circle the current month and fee below and enter the amount in the space to the right): \$ _____

Jan \$40.00 Feb \$37.50 Mar \$35.00 Apr \$32.50 May \$30.00 Jun \$27.50

Jul \$25.00 Aug \$22.50 Sept \$20.00 Oct \$17.50 Nov \$15.00 Dec \$12.50

(Note: In November or December of the current year, you will receive a \$30.00 renewal dues notice for next year)

___ Associate Member (not a FERGUS(S)ON but have a genuine interest in CFSNA) \$ _____ (Fee is the same as that for a Regular Member; enter amount from table above)

___ Reinstated Member (Fee same as above, less \$10.00; e.g. if current month is Jul, fee is \$20.00) \$ _____

___ Add 1 extra year of paid dues (2 years total membership; \$5.00 savings): RegMemFee+\$25.00 \$ _____

___ Add 2 extra years of paid dues (3 years total membership; \$15.00 savings): RegMemFee+\$45.00 \$ _____

___ Life Member (under age 60 - \$500; age 60 and over - \$300) \$ _____

___ Donation to the CFSNA Charitable Trust \$ _____

TOTAL \$ _____

Date: _____ Name (please print) Mr. Mrs. Ms. _____

Home Address _____ Phone _____

(street & number)

(include area code)

(City, State or Province) _____ Zip _____

Date of Birth _____ Place of Birth _____

Occupation _____ e-mail _____ Cell Phone _____

Are you interested in becoming a CFSNA Volunteer? _____ In what area(s)? _____

Spouse Full Name (with maiden name if applicable) _____

If your surname is not one of those eligible for membership, please explain your relation to a direct ancestor of eligible name:

Sponsor: _____ Secretary: _____

Make checks payable to: Clan Fergusson Society of North America

(Form Rev: 8/7/22)