

MEMBERSHIP APPLICATION FORM

Yes, I want to join/renew the Graves Family Association as indicated below (individual and family memberships are the same):

- **Annual** membership, \$20.
- **Sustaining** membership, \$40/year (or more). An opportunity to provide extra support.
- Plus _____ additional future years @ \$20/year (or \$40/year for sustaining)
- Sign me up for **Life** membership @ \$600 one-time (no longer any age limitation)
- Please also send newsletter back issues for the following years

(All issues are available for 1976-1987 and 1990-2002. No issues in 1988 or 1989. Prices for all back issues of the newsletter are \$10/year.)

- Please also send me the 11 issues of the Graves Newsletter (1969-71) @ \$11 plus Index @ \$2.

My Graves/Greaves/Grave/Grieve ancestry is as follows. Show your descent from your earliest known Graves ancestor. Use separate sheet if necessary. (Not necessary for renewal.)

Your Name

Address

Phone _____

Check here if you would not like your phone number published in membership directory

E-Mail Address _____

Other Graves descendants who may be interested in the Graves Family Association (be sure to include their addresses)

Please remit in U.S. dollars, make checks payable to GRAVES FAMILY ASSOCIATION, and send to: Kenneth V. Graves, 20 Binney Circle, Wrentham, MA 02093.

For **Non-U.S. payers**, please send check drawn on U.S. bank, **Postal Money Order**, or **International Money Order** in **U.S. Dollars**.