

**Dane County Area Genealogical Society**  
**P.O. Box 5652**  
**Madison, WI 53705-0652**



[www.dcags.org](http://www.dcags.org)

**RENEWAL Membership Application**

*Renew and pay online at [dcags.org](http://dcags.org) OR fill out this form and make check payable to Dane County Area Genealogical Society. Return to the address above. All memberships are annual and renew the same date the following year.*

**Individual Membership (one vote per membership)**

EMAIL Delivery of Newsletter. \$20.00

**Family Membership (individuals living in one household, 2 votes per membership)**

EMAIL Delivery of Newsletter. \$25.00

**Name:** \_\_\_\_\_

**Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**Phone** \_\_\_\_\_ **E-Mail** \_\_\_\_\_

*The following information is collected for our members' only directory so we may all better serve and interact with each other.*

**Birth Generation:**

- 1927 and Before Greatest Generation  
 1928 - 1945 Silent Generation  
 1946 - 1964 Boomer Generation

- 1965 - 1980 Generation X  
 1981 - 1997 Millennial Generation  
 1998 - Present Generation Z

**PLEASE PROVIDE ANY NEW INFORMATION TO BE CHANGED IN YOUR MEMBERSHIP PROFILE:**

**Genealogy Software You Use** \_\_\_\_\_

**Computer Operating System** \_\_\_\_\_

**Geographic Areas of Interest** Wisconsin Counties \_\_\_\_\_

U.S. States \_\_\_\_\_ Foreign Countries \_\_\_\_\_

**Any additional Surnames you are researching?** \_\_\_\_\_

**Do you belong to other genealogy or historical groups?** If so, please let us know what other groups you belong to: \_\_\_\_\_

**PLEASE HELP THE PROGRAM AND EDUCATION COMMITTEE BY ANSWERING THE FOLLOWING:**

I would like to see the following topics presented: \_\_\_\_\_

**Could you volunteer or help on the following Committees:** Membership \_\_\_ Outreach \_\_\_  
Newsletter \_\_\_ Program and Education \_\_\_ Historian \_\_\_ Web/Technology \_\_\_  
Special Interest Groups \_\_\_ Special Projects

**Would you enjoy volunteering on the DCAGS Board of Directors?** Yes \_\_\_ No \_\_\_ Maybe \_\_\_

**How would you enjoy helping DCAGS by volunteering to:** \_\_\_\_\_?

*Office Use Only* Amount \$ \_\_\_\_\_ Date \_\_\_\_\_ Cash / Check # \_\_\_\_\_