

Southern Ohio Genealogical Society

Membership Application (SOGS)

Mail to: Southern Ohio Genealogical Society
P.O. Box 414, Hillsboro, OH 45133
Website: sogs.info Email: sogs414@gmail.com

Name(s): _____

Address: _____

City, State, Zip Code: _____

Phone: _____ Email: _____

New Member: _____ Renewal: _____ Donation (501 c3): _____

Yearly membership begins September 1st. This includes subscription to the SOGS quarterly newsletter "Roots & Shoots". Please circle your desired member level below.

- Single membership, quarterly newsletter sent electronically via e-mail will remain at the same price \$15.
 - Single membership, quarterly newsletter sent USPS hard copy will increase to \$25 (also covers 2 at same address).
 - 2 at same address \$25.00 (a savings of \$5)
 - Descendant \$100.00
 - Ancestry \$125.00
 - Legacy \$250.00
 - Family Historian \$500.00
 - Researcher \$750.00
 - Genealogist \$1000.00
- Circle One:
E-mail my newsletter
Mail hard copy of my newsletter-\$25 dues

SOGS also offers members whose ancestors that lived in Highland County to complete an application with required documents to be able to join one or more of the SOGS lineage Societies. Visit our website for more details on each of these societies.

- First Families of Highland County: Ancestors in Highland County before 01 Jan 1831
- Second Families of Highland County: Ancestors in Highland County 01 Jan 1831 – 31 Dec 1860
- Society of Civil War Families of Highland County: Ancestors with County ties who served in Civil War
- Military Order of the Daughter's & Sons of Highland County: Any resident of Highland County who has an ancestor or has themselves served or currently serving in the armed forces

Please list the surnames you are or have been researching in Highland County, OH:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____

Please complete and return with dues before September 1. Southern Ohio Genealogical Society is a non-profit educational organization. SOGS does not share or sell your membership information.

Office Use Only: Received Date: _____

Membership Year: _____ Donation: _____ Other: _____