## WESTERN MASSACHUSETTS JEWISH GENEALOGICAL SOCIETY Membership Application

Please fill out the form below. Please print legibly and mail the form along with a check made out to the Western Massachusetts Jewish Genealogical Society (WMJGS) to:

WMJGS, PO Box 192, Belchertown, MA 01007

## Annual dues (calendar year Jan-Dec):

□ Renewal Members!	hip 🗆 New Membership	•
□ Individual: \$25 □ Family living	ng at same address: \$35	□ Individual lifetime \$250
(First Name)	(Last Name)	
(Email	il)	
(First Name)	(Last Name)	
(Emai	il)	
Cell: ()		
Home: ()(Phone Number)		
(Street Address)		
(Street Address Line 2)		
(City) (State) (Zip)		
Skills you are willing to share:  translating/language skills writing skills artistic/graphics skills computer/tech skills publicity/press skills areas of genealogical expertise other		
Countries of interest for any family res	earching:	