

WHIPPLE FAMILY ASSOCIATION

Membership Application

Name _____ Maiden Name _____

Address _____ City _____ State _____ Zip _____

E-mail Address _____

A. I am applying for **full** membership into the Whipple Family Association through my immigrant ancestor [] Capt. John [] Matthew [] John

B. I am applying for **associate** membership into the Whipple Family Association through my ancestor _____

Instructions:

1. Please complete all blanks for appropriate number of generations.
2. Application must be printed legibly or typed.
3. Documentation for each entry (i.e., birth, death, marriage) must accompany the application.
4. Application fee must accompany application.

1. I am the child of _____ and _____

born on _____ in _____

my parents were married on _____ at _____

2. My father/mother was born on _____ at _____,

the child of _____ and _____

who were married on _____ at _____

3. My (grandfather/grandmother) was born _____ at _____,

the child of _____ and _____

who were married on _____ at _____

4. My (gr-father/gr-mother) was born _____ at _____,
the child of _____ and _____
who were married on _____ at _____

5. My (ggr-father/ggr-mother) was born _____ at _____,
the child of _____ and _____
who were married on _____ at _____

6. My (gggr-father/mother) was born _____ at _____,
the child of _____ and _____
who were married on _____ at _____

7. My (ggggr-father/mother) was born _____ at _____,
the child of _____ and _____
who were married on _____ at _____

8. My (gggggr-father/mother) was born _____ at _____,
the child of _____ and _____
who were married on _____ at _____

9. My (ggggggr-father/mother) was born _____ at _____,
the child of _____ and _____
who were married on _____ at _____

10. My (gggggggr-father/mother) was born _____ at _____,
the child of _____ and _____
who were married on _____ at _____

11. My (gggggggr-father/mother) was born _____ at _____,
the child of _____ and _____
who were married on _____ at _____

12. My (gggggggr-father/mother) was born _____ at _____,
the child of _____ and _____
who were married on _____ at _____

If additional generations are needed, please use a blank sheet of paper.

DOCUMENTATION

Documentation refers to photocopies (does not have to be certified copies) of the following:

- birth, death, marriage, or published vital records;
- cemetery/funeral director records;
- military, or appropriate portions of pension records;
- census records;
- will/probate records;
- or deed records for each generation listed.

Published genealogies will be accepted if they list sources that can be verified. Published town/county histories will not be accepted unless accompanied by further evidence.

I hereby agree to support the Objectives of the Whipple Family Association. Further I agree that all ancestral information contained in this application may be shared with other members of the association and/or published in the Whipple Family Association newsletter or another publication sanctioned by the Association.

Signed _____
(Applicant)

Date _____

I would like my newsletter sent US Mail [] E-Mail []