GOSSELIN

UNIR POUR FRATERNISER

ASSOCIATION DES FAMILLES GOSSELIN

depuis 1979

www.associationfamillesgosselin.qc.ca

MEMBERSHIP FORM

MEMBERSHIP PERIOD GOES FROM AUGUST 1 TO JULY 31

Name : ______________________________________ **First name :** ______________________________________

Address : ____

City : ______________________________________ **Province/State :** __________________________________

Postal / Zip code : ____________________________ **Telephone :** ______________________________________

e-mail : ______________________________________ **Fax :** ____

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If you are already a member please indicate your member number : __________________

Please indicate your date of birth : day : ______________ **month :** ____________________

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MEMBERSHIP FEE

One year : _______________ **$20.00** **Two years :** _______________**$35.00**

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BASIC GENEALOGY INFORMATION

To help us in our genealogy searches, we appreciate that you give us the following information

My mother's name (at birth) : ____

My wife's / husband's name : ____

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1647, Chemin Royal, Saint-Laurent d'Orléans, Qc, Can, G0A 3Z0

Téléphone : 418-828-2896 **Télécopieur / Fax : 418-828-0149**

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