

APPLICATION FOR MEMBERSHIP

Association of Blauvelt Descendants

FOUNDED SEPTEMBER 18, 1926

I hereby apply for membership in the Association of Blauvelt Descendants I am a descendant or the spouse of a descendant of Gerrit Hendricksen van Deventer from the Province of Overijssel in The Netherlands, and a resident of New Amsterdam on Manhattan Island from the time of his marriage in 1646 till he died in 1685. I support the Association of Blauvelt Descendants and it's objectives to preserve family history, maintain family traditions, and promote an interest in the genealogy, history and culture of New Amsterdam.

Type or print clearly and complete all areas, where applicable. Give all dates in "day / month / year" format (i.e. "29 / Feb / 1995").

Full Name: Last First Middle Maiden

Date of Birth: day /mo /yr Birth Place:

Spouse:

Date of Birth: day /mo /yr Birth Place:

Date Married: / / Place:

If deceased, date of death: / / Place of burial:

Table with 4 columns: Children, Birth Date (day/mo/yr), Birth Place, Married to. Rows 1-5.

BLAUVELT LINE OF DESCENT: Trace your Blauvelt line of descent to a documented Blauvelt descendant, or an ABD Member through one of your parents or grandparents. Please use a separate sheet for earlier generations if needed. If you have questions or need help, please contact our Genealogist.

PARENTS (Give full names and mother's maiden name.)

Marriage Date: day / mo /yr Place

Father Mother

Birth Date / / Place Birth Date / / Place

Died / / Buried Died / / Buried

GRANDPARENTS

Marriage Date: day / mo / yr Place

Father Mother

Birth Date / / Place Birth Date / / Place

Died / / Buried Died / / Buried

MEMBERSHIPS REQUESTED

All Blauvelt descendants and spouses named and documented on this application, and living at the same address, are eligible for membership. Please list name, type of membership (see below), and applicable dues for each membership requested. There is a one time application processing fee of \$35.

<u>Name</u>	<u>Type</u>	<u>Dues</u>	<u>Membership # (for ABD use only)</u>
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____
6. _____	_____	_____	_____
7. _____	_____	_____	_____
Application Fee.....		<u>\$ 35.00</u>	
TOTAL		\$ _____	

Membership Schedule and Dues:

REGULAR (Adult): \$ 20.00 ASSOCIATE (Spouse): \$ 15.00 JUNIOR (children under 18 years): \$ 10.00
FAMILY MEMBERSHIP (for all family members living in one household): \$ 45.00
LIFE MEMBER (single, one time payment): \$ 750.00 ASSOCIATE LIFE MEMBER: \$ 250.00

Please sign and date the application with your address, email and phone number.
Make checks payable to **Association of Blauvelt Descendants** and mail with the application to:

Association of Blauvelt Descendants
Laurie Anne Persico
13445 Spruce Street
Thornton, CO 80602

Applicant's Signature _____	Date _____
Email: _____	Phone: (_____) _____
Street / City: _____	State: _____ Zip _____ - _____

Application Record

<u>Genealogist:</u>	<u>Membership Secretary:</u>
Date Received: _____	Date Received: _____
Date Approved: _____	Date Elected: _____
Signature: _____	Signature: _____

“A People which takes no pride in the achievements of remote ancestors will never achieve anything worthy to be remembered with pride by remote descendants.” Thomas Macaulay