



Membership Application Form

Name: _____ Address: _____
 City: _____ State/Province: _____ Country: _____
 Postal Code: _____ Email: _____
 Phone: _____ Birth year: _____
 German-Russian Heritage: Yes No
 Ancestral Surname(s): _____

 Ancestral Village(s): _____

Optional Information:

Spouse/Partner Name: _____ Birth year: _____
 German-Russian Heritage: Yes No Phone number: _____
 Email (if different from above): _____
 Ancestral Surname(s): _____
 Ancestral Village(s): _____

How did you hear about AHSGR?

Member _____ Website _____ Chapter _____ Facebook _____ Instagram _____ Ad _____ Event _____
 Other _____
 Name of referring member _____

Type of Membership

- ___ STANDARD: \$60/year with digital publications emailed to you
- ___ STANDARD: \$95/year with printed publications mailed to you
- ___ SUSTAINING: \$110/year, digital or print publications
- ___ STUDENT: \$15/year (15-24 years old), digital publications
- ___ YOUTH: \$8/year (14 and younger) Parent name, if under 18: _____
- ___ LIFE (with digital publications, **or additional \$35/year for print publications mailed to you**)
 - Age: 56 or older _____ \$750 paid in full
 - 41 - 55 _____ \$900 paid in full
 - 40 or younger _____ \$1,050 paid in full

Send payment in US dollars to:

ASHGR
 631 D Street
 Lincoln, NE 68502