

An die  
Pfälzisch-Rheinische Familienkunde e.V.  
Rottstrasse 17 (Stadtarchiv)

**67061 Ludwigshafen**

Interne Vermerke:

Mitgliedsnummer: PRFK \_\_\_\_\_

Schatzmeister:

## Membership Application

I apply for membership in the Pfälzisch-Rheinische Familienkunde e.V with effect from 1. January 20 \_\_ \_\_.  
I acknowledge their status and commit myself to pay the membership fees on time.  
The membership fee is currently 30,- € / 50 US\$. I agree to allow the publication of this data (without bank data) in the media of the association (magazines, books or electronic media such as Internet Database (available only to members)). This consent form, I may at any time revoke. The revocation must be sent in writing to the above address.

Title, First name(s), Surname

\_\_\_\_\_

Street and house number

\_\_\_\_\_

Zip Code, Town / City

\_\_\_\_\_

Country

\_\_\_\_\_

Profession

\_\_\_\_\_

Date of birth, Place of birth

\_\_\_\_\_

Telephone, Fax

\_\_\_\_\_

Email – Address

\_\_\_\_\_

Homepage

http:// \_\_\_\_\_

I will transfer the membership suscription to the **Paypal- account:** [order@prfk.org](mailto:order@prfk.org)  
or send a check for 50,- US-Dollar with an added **15,00 US\$** for bank charges.

## „who does reseach what?“

**A- Räumliche Forschungsgebiete**  
(Emigration and Immigration areas)):

Research areas (Names of places)\*);

**B- Family names in research:**

Research areas (Names of families) \*);

**C- What's in the planning stage?:**

**D- I use a computer**

yes  no

**E-Which genealogy program(s) do you use?**

I agree with the publication of the above  
data (adres and research data) in the  
media (magazines, books and electronic  
media) of the association.

yes  no

I answer questions  
in english  
in french

yes  no

yes  no

yes  no

I have created an ancestral top list:

yes  no

I've made available this ancestral top list  
to the association

yes  no

I've published/posted:

I have the following suggestion:

\_\_\_\_\_

Place

\_\_\_\_\_

Date

\_\_\_\_\_

Signature

With the assurance of my genealogic inheritance is mandated:

Date: \_\_\_\_\_ Name: \_\_\_\_\_

Address: \_\_\_\_\_

\*) Eingabemuster: Familienname, Familienname, Familienname (Ortsname);  
Familienname (Ortsname, Ortsname);  
Entsprechend bei Forschungsgebieten