

# Family Association Harm and Hille Oldebusch



## Application for Membership

Family Association Harm and Hille Oldebusch  
 15 Smithshire Estates  
**Andover MA, 01810**

With this document I (we) like to apply for Membership in the Family Association subject to Membership Rules.

<b>Applicant</b>			<i>No., Street</i>
<i>Last Name</i>	<i>First Name</i>	<i>Birth Date</i>	<i>Town, State</i>
			<i>ZIP code</i>
			<i>Phone</i>
			<i>Fax</i>
			<i>email</i>

<b>Other Family Members</b>			<b>Relationship/Education</b>		
<i>Last Name</i>	<i>First Name</i>	<i>Birth Date</i>	<i>Child</i>	<i>Student</i>	<i>Other*</i>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Last Family Member with the Name Ohlebusch, Ohlenbusch, Ohldebusch, Oldenbusch, Olenbush, etc.

<i>Last Name</i>	<i>First Name</i>	<i>Birth Date</i>	<i>Relationship</i>	<i>No., Street</i>	<i>Town, State</i>	<i>Zip code</i>

Have you already done some genealogy research for your family branch?  yes  no

Please enter remarks, suggestions and corrections on the back.

Contributions per year (as of 2012):

Married Couples, Families, or Single Persons                      \$ 10  
 Students    \$ 3

Contributions or payments can be sent to the USA contact person

Date: .....

Signature: .....