Sons and Daughters of Virginia Founding Fathers
Membership Inquiry

Dear Prospective Member: Please complete this form and either e-mail or mail to the following address: **Governor General Julie Hesler, email julie.hesler@icloud.com, or 105 Cedar Point Drive, LaGrange, GA 30241-9511.**

I am interested in membership in the Sons and Daughters Virginia Founding Fathers.

Complete Legal Name: _____

Address: _____

City, State, Zip i**ncluding 4 digit ext (REQUIRED**): _____

Phone #s: _____

E-mail: _____

Spouse's Name: _____

My Virginia Ancestor's Name is: _____

Other lineage societies you have joined based on this VA ancestor lineage: _____
_____
_____
_____
_____
_____
_____

Other lineage societies you have joined: _____
_____
_____
_____
_____
_____

OPTIONAL (does not affect your prospective member status) List any skills, interests, or other information you would like to share, e.g., experienced in digitalization of records and would like to be on the technology committee to help preserve records, documents, etc.

_____
_____
_____
_____
_____
_____

For SDVAFF Internal Use

Date Rec'd: _____
Date to Membership Committee: _____
Application Sent: _____
Application Approved: _____