General Society, Sons of the Revolution
Request for Dual Membership

First section to be completed by applicant; second by secretary of applicant’s current State Society, and third section by Secretary or Registrar of new State Society. Copy of completed application on file with current State Society must be attached. Two copies of this form are to be completed: one for the new State Society and one for the General Society records. Please type all information or print in black ink.

PLEASE NOTE that use of this form is subject to approval of the receiving State Society. Some State Societies may require use of a standard long form application instead.

I, ___________________________________________ hereby apply for dual membership in the ______________________________________ State Society effective _____________.

My General Society membership number is ___________, and my current state society number with the __________________________________ State Society is _____________.

Said State Society certifies that I am a member in good standing. A copy of my approved application for membership in that State Society is attached, which I understand is subject to the approval of your State Society. I hereby reaffirm my pledge made on the original application.

Signature of Member ___________________________ Date ________________

Current mailing address ____________________________________________

______________________________________________________________

______________________________________________________________

Section Two—This section to be completed by secretary of applicant’s current State Society.

Verified as member in good standing of the __________________________ State Society.

Secretary ___________________ Date ________________

Section Three—This section to be completed by applicant’s new State Society, upon receiving him into membership.

Proposed by ____________________________ (signed)

Seconded by ____________________________ (signed)

Member accepted and approved by Board of Managers of the __________________________ State Society on _________________.

Secretary (signed) ____________________________________________

State membership number assigned: _____________ (Copy of application to other state society attached.)