

The Society of Indiana Pioneers



ITS OBJECT IS TO HONOR THE MEMORY AND THE WORK OF
THE PIONEERS OF INDIANA

ORGANIZED 1916 INCORPORATED 1922

OFFICE:
140 North Senate Avenue
Indianapolis IN 46204-2207
(317) 441-8293

www.indianapioneers.com

Initial or Added Line

APPLICATION FOR MEMBERSHIP OF:

[or, if other:] _____
(Title) (First Name) (Middle and/or Maiden Name) (Last Name) (Suffix)

Full Name of Spouse _____

Single Married Divorced Widowed

Mailing Address _____
(Street) (City) (State) (Zipcode)

Phone Number _____ E-mail Address _____

CHECK HERE IF YOU DO **NOT** WANT YOUR PHONE LISTED IN THE YEARBOOK.

CHECK HERE IF YOU DO **NOT** WANT YOUR EMAIL LISTED IN THE YEARBOOK.

I AM A DESCENDANT OF _____ who was born

on _____ in _____ and who came
(day/month/year) (state and city, county, township if known)

to Indiana from _____ in or prior to _____ and
(state and city, county, township if known) (year/month, if known)

settled in _____, Indiana.
(county)

The undersigned agrees and asserts as follows:

1. Unless I advise you in writing to the contrary, this application may be photocopied for the use of other members or prospective members; and
2. I have reviewed the information submitted with this application and, to the best of my knowledge and belief, the statements are accurate and complete.

(Signature of Applicant)

(Date)

LINEAGE and REFERENCES

Type or print plainly in black ink. Write all dates in day, month, year format (07 Dec 1941).

SUBMITTER

Gen. 1

Full name _____
Date of birth _____ Place of birth _____
Spouse's full name (maiden if female) _____
Spouse's date of birth _____ Spouse's place of birth _____
Spouse's date of death _____ Spouse's place of death _____
Date of marriage _____ Place of marriage _____
PROOF (attach copies of documents used) _____

SUBMITTER'S PARENTS

Gen. 2

Full name _____
Date of birth _____ Place of birth _____
Date of death _____ Place of death _____
Spouse's full name (maiden if female) _____
Spouse's date of birth _____ Spouse's place of birth _____
Spouse's date of death _____ Spouse's place of death _____
Date of marriage _____ Place of marriage _____
PROOF (attach copies of documents used) _____

SUBMITTER'S GRANDPARENTS

Gen. 3

Full name _____
Date of birth _____ Place of birth _____
Date of death _____ Place of death _____
Spouse's full name (maiden if female) _____
Spouse's date of birth _____ Spouse's place of birth _____
Spouse's date of death _____ Spouse's place of death _____
Date of marriage _____ Place of marriage _____
PROOF (attach copies of documents used) _____

SUBMITTER'S GREAT GRANDPARENTS

Gen. 4

Full name _____
Date of birth _____ Place of birth _____
Date of death _____ Place of death _____
Spouse's full name (maiden if female) _____
Spouse's date of birth _____ Spouse's place of birth _____
Spouse's date of death _____ Spouse's place of death _____
Date of marriage _____ Place of marriage _____
PROOF (attach copies of documents used) _____

SUBMITTER'S GREAT-GREAT GRANDPARENTS

Gen. 5

Full name _____
Date of birth _____ Place of birth _____
Date of death _____ Place of death _____
Spouse's full name (maiden if female) _____
Spouse's date of birth _____ Spouse's place of birth _____
Spouse's date of death _____ Spouse's place of death _____
Date of marriage _____ Place of marriage _____
PROOF (attach copies of documents used) _____

SUBMITTER'S Full name _____
3 GREAT Date of birth _____ Place of birth _____
GRANDPARENTS Date of death _____ Place of death _____
Gen. 6 Spouse's full name (maiden if female) _____
Spouse's date of birth _____ Spouse's place of birth _____
Spouse's date of death _____ Spouse's place of death _____
Date of marriage _____ Place of marriage _____
PROOF (*attach copies of documents used*) _____

SUBMITTER'S Full name _____
4 GREAT Date of birth _____ Place of birth _____
GRANDPARENTS Date of death _____ Place of death _____
Gen. 7 Spouse's full name (maiden if female) _____
Spouse's date of birth _____ Spouse's place of birth _____
Spouse's date of death _____ Spouse's place of death _____
Date of marriage _____ Place of marriage _____
PROOF (*attach copies of documents used*) _____

SUBMITTER'S Full name _____
5 GREAT Date of birth _____ Place of birth _____
GRANDPARENTS Date of death _____ Place of death _____
Gen. 8 Spouse's full name (maiden if female) _____
Spouse's date of birth _____ Spouse's place of birth _____
Spouse's date of death _____ Spouse's place of death _____
Date of marriage _____ Place of marriage _____
PROOF (*attach copies of documents used*) _____

SUBMITTER'S Full name _____
6 GREAT Date of birth _____ Place of birth _____
GRANDPARENTS Date of death _____ Place of death _____
Gen. 9 Spouse's full name (maiden if female) _____
Spouse's date of birth _____ Spouse's place of birth _____
Spouse's date of death _____ Spouse's place of death _____
Date of marriage _____ Place of marriage _____
PROOF (*attach copies of documents used*) _____

SUBMITTER'S Full name _____
7 GREAT Date of birth _____ Place of birth _____
GRANDPARENTS Date of death _____ Place of death _____
Gen. 10 Spouse's full name (maiden if female) _____
Spouse's date of birth _____ Spouse's place of birth _____
Spouse's date of death _____ Spouse's place of death _____
Date of marriage _____ Place of marriage _____
PROOF (*attach copies of documents used*) _____

Please list any patriotic or civil service of your pioneer ancestor, e.g. military or patriotic service in Revolutionary War, War of 1812, militia; civil officer of territory, state or county; minister, etc.:

Evidence that my said ancestor lived in Indiana at the time stated is as follows:

How did you first learn about The Society of Indiana Pioneers?

Names and addresses of other family members descended on this line who might be interested in membership in The Society of Indiana Pioneers:

HAVE YOU ENCLOSED A PHOTOCOPY OF ALL DOCUMENTS USED AS PROOF?

FOR OFFICE USE ONLY

EXAMINED AND APPROVED:

Genealogist:	.....	on	.....
Registrar:	.....	on	.....
Membership	.....	on	.....
Chairman:	.....		.....
Secretary:	.....	on	.....

Has this ancestor been previously approved? YES NO

ADDITIONAL REFERENCES

List Generation # followed by any additional source citations. (Example: Gen#1: "references")

Please start a new line between Generations requiring extra references.

References: