



North Carolina Society of Sons of the Revolution

www.nc-sor.org

Proposal for Membership



INSTRUCTIONS: The Proposer shall have the Candidate complete and sign this autobiographical form. Thereafter, the Proposer and Secunder shall sign the form and return it to the Secretary of the Society. Letters of recommendation from two members must accompany this form and they may be from the Proposer and Secunder. *(Please type or print legibly.)*

FULL NAME OF CANDIDATE _____

Home Address: Street: _____ City: _____ State: _____ Zip: _____

Telephone Number _____ Fax _____

Email _____ Date & Place of Birth _____

PERSONAL

Single Married Divorced Widowed

If applicable, write wife's full maiden name and the names of any children _____

Name of Revolutionary Ancestor from whom descent is claimed. (Provide additional information on reverse side.) _____

BUSINESS

Occupation: _____ Title _____

Name of Business: (If a corporation, state title and duties. If partnership, list partners.) _____

Address _____

Type of Business _____ Email _____

Telephone Number _____ Fax _____

COMMUNITY ACTIVITIES

List present associations with other organizations, clubs, and societies. _____

Include any other information that you believe will be helpful to the Admissions Committee. _____

List military service and rank. _____

List any public office held and give brief details. _____

EDUCATION

Graduate or Professional School _____ Degree _____ Date Graduated: _____

College _____ Degree _____ Date Graduated: _____

Secondary School _____ Location _____ Date Graduated: _____

DATE: _____

Signature of Candidate

To the best of my knowledge and belief, the information contained in this Proposal is correct.

Print Name of Proposer _____

Signature of Proposer

Print Name of Secunder _____

Signature of Secunder

Proposal for Membership

Approved by the Admissions Committee

_____	_____
_____	_____
_____	_____
_____	_____
Date	Chairman

ANCESTOR'S SERVICE

My qualified lineal Revolutionary Ancestor is:

Name _____ who was
Born in _____ on _____, 17_____
Died in _____ on _____, _____

My ancestor's services during the War of the Revolution were:

(List dates of service and activities performed by your ancestor while acting as a soldier, sailor, or marine, or as a military, naval or civil officer.)

Verification of this service can be found in the following authorities (see Instruction Sheet):

