



Saint Andrew's Society of Williamsburg

Application for Membership

PO Box 533, Williamsburg VA 23187

Full Name: _____

Date and Place of Birth: _____

Schools/Colleges: _____

Business or Profession: _____

Spouse's Name: _____

Names and Ages of Children: _____

Address: _____

Telephone(s): _____

E-mail: _____

Years at Current Address: _____

Legacy Application? Yes or No _____

(A Legacy member is the son/grandson or daughter/granddaughter of an active member, in good standing, or of a deceased former member, who is age eighteen through twenty-one. Admission fees are waived for Legacy Members; however annual dues are required.)

If Yes, name of Father/Mother or Grandfather/Grandmother: _____

Membership in Other Professional or Social Organizations: _____

Nature of Scottish Family Connections (documentation not required): _____

Any Visits to Scotland – Frequency and Purpose: _____

General Scottish Interests – (History, Literature, Arts etc): _____

Clan Association(s): _____

Membership in Clan Organization or Other Scottish Society: _____

What tartan(s) do you wear? _____

Date: _____ Signature of Applicant: _____

To the best of our knowledge, the above applicant is of sound character and is entirely suitable to membership in the Society. Applicant will actively participate in the functions of the Society as circumstances allow and will perform conscientiously any duties undertaken.

Sponsor: _____ Date: _____

Co-Sponsor: _____ Date: _____

Checklist

- Initiation and First Year's Dues (\$60.00) _____
- Small Photograph suitable for digitization _____
- Current local address and telephone number included _____
- Verification of Legacy Member Eligibility _____