



NATIONAL NUMBER _____

STATE NUMBER _____

DESCENDANTS OF FOUNDERS OF NEW JERSEY

Application for Membership

NAME OF APPLICANT: _____

SPOUSE (IF ANY): _____

ADDRESS: _____

EMAIL: _____

The NEW JERSEY FOUNDER: _____

who was born at _____ on _____

was a resident at _____ and died on _____

at _____, is the ancestor through whom

I apply for membership.

PROOF that _____ was a FOUNDER of NEW

JERSEY prior to 17 April 1702 (o.s.): _____

Application fee and worksheet received: _____

Lineage verified and approved: _____

Final application received: _____

Elected to membership: _____

The _____ Membership Fee of \$ _____ was paid on _____

REGISTRAR GENERAL _____

ALL NAMES SHOULD BE GIVEN IN FULL AND LINEAGE FILLED OUT COMPLETELY. APPLICATION IS TO BE TYPED AND FREE OF ALTERATIONS. APPLICATION MUST BE SIGNED BY APPLICANT.

Documented Lineage of Applicant

Applicant

Cited References in this Column:

Gen. 1

born at

on

married at

on

to

born at

on

died at

on

The Parents of the Applicant were:

References:

Gen. 2

born at

on

died at

on

married at

on

to

born at

on

died at

on

The Parents of _____ were:

References:

Gen. 3

born at

on

died at

on

married at

on

to

born at

on

died at

on

The Parents of _____ were:

References:

Gen. 4 _____
 born at _____
 on _____
 died at _____
 on _____
 married at _____
 on _____
 to _____
 born at _____
 on _____
 died at _____
 on _____

The Parents of _____ were:

References:

Gen. 5 _____
 born at _____
 on _____
 died at _____
 on _____
 married at _____
 on _____
 to _____
 born at _____
 on _____
 died at _____
 on _____

The Parents of _____ were:

References:

Gen. 6 _____
 born at _____
 on _____
 died at _____
 on _____
 married at _____
 on _____
 to _____
 born at _____
 on _____
 died at _____
 on _____

The Parents of _____ were:

References:

Gen. 7

born at _____

on _____

died at _____

on _____

married at _____

on _____

to _____

born at _____

on _____

died at _____

on _____

The Parents of _____ were:

References:

Gen. 8

born at _____

on _____

died at _____

on _____

married at _____

on _____

to _____

born at _____

on _____

died at _____

on _____

The Parents of _____ were:

References:

Gen. 9

born at _____

on _____

died at _____

on _____

married at _____

on _____

to _____

born at _____

on _____

died at _____

on _____

The Parents of _____ were:

References:

Gen. 10

born at _____

on _____

died at _____

on _____

married at _____

on _____

to _____

born at _____

on _____

died at _____

on _____

The Parents of _____ were:

References:

Gen. 11

born at _____

on _____

died at _____

on _____

married at _____

on _____

to _____

born at _____

on _____

died at _____

on _____

The Parents of _____ were:

References:

Gen. 12

born at _____

on _____

died at _____

on _____

married at _____

on _____

to _____

born at _____

on _____

died at _____

on _____

The Parents of _____ were:

References:

Gen. 13

born at _____

on _____

died at _____

on _____

married at _____

on _____

to _____

born at _____

on _____

died at _____

on _____

The Parents of _____ were:

References:

Gen. 14

born at _____

on _____

died at _____

on _____

married at _____

on _____

to _____

born at _____

on _____

died at _____

on _____

I, _____, applicant for membership in DESCENDANTS OF FOUNDERS OF NEW JERSEY do declare that all facts stated in this application are true to the best of my knowledge and belief.

(Signature of Applicant)