



MEMBERSHIP FORM

Section reserved for administration	
Date of membership:	
Membership number:	
Directory reference:	

MEMBER INFORMATION

Name:		First name:	
Address:		Municipality:	
Province (state):		Code postal:	
Phone:		E-mail:	
Date of birth:		Place of birth:	

I would like to receive the Le Bé newsletter: ☐ by email ☐ by post ☐

I wish to receive renewal notices: ☐ by email ☐ by post ☐

INFORMATION ABOUT YOUR SPOUSE

Name:		First name:	
His father:		His mother:	

INFORMATION ABOUT YOUR UNION

Religious ☐ Civil ☐ Common-law ☐ Date:

wedding marriage law union

Wedding Venue (courthouse, parish, province, state):

INFORMATION ABOUT YOUR FIRST CHILD

Name:		First name:	
Date of birth:		Place of birth:	

INFORMATION ABOUT YOUR PARENTS AND GRANDPARENTS

Your father:		Your mother:	
Maternal grandfather:		Grandma mat.:	

Religious ☐ Civil ☐ Common-law ☐ Date:

wedding marriage law union

Wedding Venue (courthouse, parish, province, state):

Grandfather Dubé: Grandma Dubé:

Membership costs \$30 annually. L'Association des Dubé d'Amérique genealogy department may contact you for additional information, such as information about your children and siblings, to maintain its directory of *Les descendants de Mathurin Dubé et Marie Campion*.

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ASSOCIATION DES DUBÉ D'AMÉRIQUE

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