

**THE PILGRIM HENRY SAMSON KINDRED**  
**MEMBERSHIP APPLICATION**  
*PLEASE TYPE OR PRINT*

Full Name of Applicant: (Mr./Mrs./other) \_\_\_\_\_

Street Address: \_\_\_\_\_ Apt./Floor \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip+4 \_\_\_\_\_

Home phone (     ) \_\_\_\_\_ FAX (     ) \_\_\_\_\_

E-mail (IMPORTANT) \_\_\_\_\_ Date of Birth (m/d/y) \_\_\_\_\_

Retired?: (Yes/No) \_\_\_\_\_ Occupation: \_\_\_\_\_ (before retirement)

**Full** Maiden Name if different from above: \_\_\_\_\_

**Full** Name of Spouse: \_\_\_\_\_

How did you learn of the Kindred? \_\_\_\_\_

Are you a member of the Mayflower Society? (Yes/No) \_\_\_\_\_ If yes GSMD# \_\_\_\_\_ State# \_\_\_\_\_

Circle name of ancestor from whom you claim descent: Pilgrim Henry Samson / Abraham Sampson / none

**Please check Category of Membership sought:**

Active Member (Age 18 or over who has attached a documented lineage from Henry and Anne (Plummer) Samson or Abraham Sampson and one of his wives: \$20 entrance + \$15 dues = \$35.

Junior Member (Under age 18 who has attached a documented lineage from Henry and Anne (Plummer) Samson or Abraham Sampson and one of his wives. Juniors may not serve on the Board of Assistants, but may serve on one of the committees. Single \$25 fee good until age 18.

Associate Active Member (Age 18 or over who has not or chooses not to file a documented lineage at this time. (Prohibited by the Bylaws from serving as one of the four Officers but may serve on the Board of Assistants and committees.) \$20 entrance + \$15 dues = \$35.

Associate Junior Member (Under age 18 who has not or chooses not to file a documented lineage at this time. (Juniors may not serve on the Board of Assistants, but may serve on one of the committees.) Single \$25 fee good until age 18.

Permission is given to add my **deceased** ancestors to the Pilgrim Henry Samson Kindred database.

Signature of Applicant \_\_\_\_\_ Date: \_\_\_\_\_

Please write names and addresses (include E-mail if possible) of prospective Kindred members here:

Mail this form with check payable to "Pilgrim Henry Samson Kindred" for appropriate fee and dues to:

Mr. Scott Samson  
Membership committee, PHSK  
PO Box 302  
Lisbon Falls, ME 04252  
E-MAIL [scottbsi@myfairpoint.net](mailto:scottbsi@myfairpoint.net)

Date Application received: \_\_\_\_\_ by: \_\_\_\_\_

Date Application approved: \_\_\_\_\_ by: \_\_\_\_\_