

The Tennessee Society of the Sons of the American Revolution

Application for Dual Chapter Membership

Name _____ National No. _____

Date _____

To the Secretary of the Tennessee Society of the Sons of the American Revolution:

I, _____, being a member of the Tennessee Society of the Sons of the American Revolution, _____ Chapter, hereby request dual membership with the Tennessee Society of the Sons of the American Revolution, _____ Chapter.

I recognize that it is my responsibility to maintain my dual membership dues with the dual Chapter and that my annual dues payment only maintains my dues for my primary Chapter.

Signature of Member

Address

City State Zip

Mail this form to:

Raymond A. Clapsadle
VP Data management, TNSSAR
48 Redthorn Cove
Cordova, TN 38018-7244