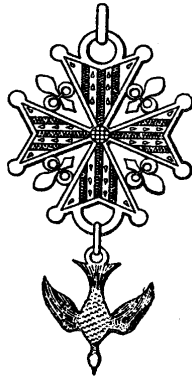


\_\_\_\_\_  
Original Membership Number

\_\_\_\_\_  
New Membership Number



# The National Huguenot Society

## APPLICATION FOR REINSTATEMENT

**A COPY OF MEMBER'S APPLICATION MUST ACCOMPANY THIS FORM**

I, \_\_\_\_\_, a former member of The Huguenot Society of \_\_\_\_\_, do hereby apply for reinstatement in The National Huguenot Society and The Huguenot Society of \_\_\_\_\_.

(State) (State)

My membership was terminated on \_\_\_\_\_.

(Date)

Applicant Signature: \_\_\_\_\_ Date \_\_\_\_\_  
(Do not use initials -- write out each name in full)

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Nine digit Zip \_\_\_\_\_

Telephone: (\_\_\_\_\_) \_\_\_\_\_ E-Mail: \_\_\_\_\_

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**To Be Completed by Registrar of Receiving State Society  
and by the Registrar General of *The National Huguenot Society***

\_\_\_\_\_ is hereby accepted as a member of The Huguenot Society of \_\_\_\_\_.

(Receiving State)

State Registrar of receiving chapter \_\_\_\_\_ Date \_\_\_\_\_  
(Signature)

Fee received and reinstatement approved by National Registrar General on \_\_\_\_\_.

(Date)

Registrar General \_\_\_\_\_  
(Signature)