



STOVALL FAMILY ASSOCIATION MEMBERSHIP APPLICATION

Membership includes a subscription to quarterly journal, genealogy research assistance on your Stovall line, invitation to the triennial reunion, connections to Stovalls all over the United States and much more.

Name: _____

Street Address: _____

City, State, Zip Code +4: _____

Cell/Home Phone: _____

Email: _____

Membership increases to \$25 effective January 1, 2023. If renewing before January dues are \$20.

Member Type	# of years/books	Total
<input type="checkbox"/> New Member \$25		\$
<input type="checkbox"/> Renewal \$25		\$
<input type="checkbox"/> Book order w/Membership \$70		\$
<input type="checkbox"/> Gift Membership \$25		\$

Gift Recipient Name: _____

Street Address: _____

City, State, Zip Code +4: _____

Cell/Home Phone: _____

Email: _____

Donation to the Association \$ _____ Total Enclosed \$ _____ Thank you!

Make check payable to: Stovall Family Association

Send check to: Tom Stovall, 3345 Tibey Court, Dubuque, IA 52002-2849

Pay Online: <http://stovall.org/become-a-member/>

Dues paid online incur a processing fee.