

The Association of Scottish Genealogists and Researchers in Archives

Application for Full Membership of ASGRA

Name.....

Address

..... **Post Code**

Telephone Number **Date of Birth**

Email Address.....

Qualifications

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Courses on Genealogy and Palaeography Attended

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Research Experience

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I hereby agree to abide by the Code of Practice of the Association

Applicant's Signature **Date**

Please enclose your application fee of £15.00