

Application for Membership in the Thomas Minor Society

(Please complete all applicable boxes)

Name of Applicant (Descendant):	Email Address:
Street Address:	Telephone: ()
City, State, ZIP	Send your completed two-part application (this page plus a completed family group sheet) with a check or money order for \$15.00 (USD) payable to The Thomas Minor Society to: <i>Elaine H. Wood, Genealogist, Thomas Minor Society, 915 West 630 North, Orem, UT 84057-3611</i>
If married, full name of spouse:	

Line of Descent from Thomas Minor (1608 – 1690)

(Enter all dates as Day Month Year (e.g., 19 Jan 1947))

	Name of Miner/Minor Ancestor	Birth	Death	Marriage	Full Name of Spouse
Parent		Date:	Date:	Date:	
		Place:	Place:	Place:	
Grandparent		Date:	Date:	Date:	
		Place:	Place:	Place:	
Great Grandparent		Date:	Date:	Date:	
		Place:	Place:	Place:	
2 nd Great Grandparent		Date:	Date:	Date:	
		Place:	Place:	Place:	
3 rd Great Grandparent		Date:	Date:	Date:	
		Place:	Place:	Place:	
4 th Great Grandparent		Date:	Date:	Date:	
		Place:	Place:	Place:	
5 th Great Grandparent		Date:	Date:	Date:	
		Place:	Place:	Place:	
6 th Great Grandparent		Date:	Date:	Date:	
		Place:	Place:	Place:	
7 th Great Grandparent		Date:	Date:	Date:	
		Place:	Place:	Place:	
8 th Great Grandparent		Date:	Date:	Date:	
		Place:	Place:	Place:	

(Attach additional page if necessary)

Family Group Sheet (Use additional sheets if necessary)

Husband			
Born	date:	place:	
Christened	date:	place:	
Died	date:	place:	
Buried	date:	place:	
Address			
Father		Mother	
Married	date:	place:	
Wife			
Born	date:	place:	
Christened	date:	place:	
Died	date:	place:	
Buried	date:	place:	
Address			
Father		Mother	
Children			
1	gender		
Born	date:	place:	
Christened	date:	place:	
Died	date:	place:	
Buried	date:	place:	
Address			
Spouse		name:	married (date and place):
2	gender		
Born	date:	place:	
Christened	date:	place:	
Died	date:	place:	
Buried	date:	place:	
Address			
Spouse		name:	married (date and place):
3	gender		
Born	date:	place:	
Christened	date:	place:	
Died	date:	place:	
Buried	date:	place:	
Address			
Spouse		name:	married (date and place):
4	gender		
Born	date:	place:	
Christened	date:	place:	
Died	date:	place:	
Buried	date:	place:	
Address			
Spouse		name:	married (date and place):