

Membership Renewal Form

Canary Islands Descendants Association of San Antonio



Please submit this form when paying your dues and **include your current address, phone number, and email.** Dues become payable January 1st of every New Year with a deadline of March 31st. Submit your dues before the deadline to avoid being delinquent and dropped from active membership. Thank you.

Ν	lame:				
Δ	ddress:				
C	City, State and	Zip:			
Phone:			Email:		
Associate Member's Phone:		er's Phone:	Email:		
Name:			Type Membership (1-7)	Amount:	
Name:			Type Membership <i>(1-7)</i>	Amount:	
Name:			Type Membership <i>(1-7)</i>	Amount:	
Name:			Type Membership (1-7)	Amount:	
				Total:	
				changes of contact information. This will es. (Use additional sheets if necessary.)	
Me	embership C	ategories:			
1.	Direct-Desc	endant Member - Dues	\$35.00 annually		
	Associate Member - Dues \$15.00 annually				
	This category is for the legal spouse of a living or deceased Direct-Descendant Member.				
3. Junior Member - No annual dues This category is for children up to the age of 17 years who have submitted an application for approval. At 18 years of age they become Direct-Descendant Members and payannual dues.					
				application for approval.	
4.					
	This category is for anyone who is interested in our organization and does not qualify for any other membership.				
5.					
_	This category gives anyone a 2 year limit to complete their application. No dues are paid until they are members.				
6.	Honorary Member - No annual dues				
7.	This is only for a benefactor who has contributed generously, consistently, or significantly to the Association. Affiliate Member - No annual dues				
/.	This category is for a member in active & good standing of a sister Canary Islands association (such as Louisiana).				
Send Dues to:		Canary Islands Descendants Association Attn: Treasurer		 Make your check or money order payable to CIDA. 	
		P.O. Box 12618 San Antonio, TX 78212	2	 Dues are also payable online at https://canary-islands-descendants- association.square.site/. 	
Me	embership D	irectory:			
		membership directory ar mation will be published		tive members. As an active member,	
If you do not want your contact information published in the membership directory, check the box below and sign. (Please note that by choosing not to have your contact information published in the directory, your name will still be listed under the family through whom you joined CIDA.)					
	\square No, I do not want my contact information included in the membership directory.				

Date

Signature