

- APPLICATION TYPE:**
- REGULAR MEMBERSHIP**
 - JUNIOR MEMBERSHIP**
 - MEMORIAL MEMBERSHIP**
 - SUPPLEMENTAL**



National Number _____

State Number _____

Chapter, the _____ State Society

NATIONAL SOCIETY

SONS OF THE AMERICAN REVOLUTION

I hereby apply for membership in this Society by the right of bloodline descent from: _____ Gen.# _____

who assisted in establishing American Independence while acting in the capacity of: _____

NAME OF APPLICANT: _____ Age _____
 (First) (Middle) (Last)

Street, R.D. or P.O. Box: _____ Email: _____

City: _____ State: _____ Zip Code: _____ Telephone: _____

Name as you wish it to appear on SAR Certificate: _____

STATEMENT OF BLOODLINE TO PATRIOT ANCESTOR

(Give all names, dates, and places known. Show dates as day, month, and year e.g. **01 JAN 1900**)

		DATE	CITY/COUNTY/STATE
1. I am _____	born	_____	_____
and my _____ wife	born	_____	_____
NSDAR# _____	died	_____	_____
(If Remarried)	married	_____	_____
my _____ wife	born	_____	_____
NSDAR# _____	died	_____	_____
	married	_____	_____
2. I am the son of _____	born	_____	_____
NSSAR# _____	died	_____	_____
and his _____ wife	born	_____	_____
NSDAR# _____	died	_____	_____
Who is the son <input type="checkbox"/> /daughter <input type="checkbox"/> of _____	married	_____	_____
3. Grandson of _____	born	_____	_____
NSSAR# _____	died	_____	_____
and his _____ wife	born	_____	_____
NSDAR# _____	died	_____	_____
Who is the son <input type="checkbox"/> /daughter <input type="checkbox"/> of _____	married	_____	_____
4. Great-Grandson of _____	born	_____	_____
	died	_____	_____
and his _____ wife	born	_____	_____
	died	_____	_____
Who is the son <input type="checkbox"/> /daughter <input type="checkbox"/> of _____	married	_____	_____
5. Great ² Grandson of _____	born	_____	_____
	died	_____	_____
and his _____ wife	born	_____	_____
	died	_____	_____
Who is the son <input type="checkbox"/> /daughter <input type="checkbox"/> of _____	married	_____	_____
6. Great ³ Grandson of _____	born	_____	_____
	died	_____	_____
and his _____ wife	born	_____	_____
	died	_____	_____
Who is the son <input type="checkbox"/> /daughter <input type="checkbox"/> of _____	married	_____	_____
7. Great ⁴ Grandson of _____	born	_____	_____
	died	_____	_____
and his _____ wife	born	_____	_____
	died	_____	_____
Who is the son <input type="checkbox"/> /daughter <input type="checkbox"/> of _____	married	_____	_____
8. Great ⁵ Grandson of _____	born	_____	_____
	died	_____	_____
and his _____ wife	born	_____	_____
	died	_____	_____
Who is the son <input type="checkbox"/> /daughter <input type="checkbox"/> of _____	married	_____	_____
9. Great ⁶ Grandson of _____	born	_____	_____
	died	_____	_____
and his _____ wife	born	_____	_____
	died	_____	_____
Who is the son <input type="checkbox"/> /daughter <input type="checkbox"/> of _____	married	_____	_____

10. Great⁷Grandson of _____ born _____
 died _____
 and his _____ wife _____ born _____
 died _____
 Who is the son /daughter of _____ married _____

11. Great⁸Grandson of _____ born _____
 died _____
 and his _____ wife _____ born _____
 died _____
 Who is the son /daughter of _____ married _____

12. Great⁹Grandson of _____ born _____
 died _____
 and his _____ wife _____ born _____
 died _____
 married _____

REVOLUTIONARY WAR ANCESTOR --- Generation # _____
 BURIED in the _____ Cemetery at _____

REFERENCES: Proof is needed only for individuals in the bloodline. Furnish a copy of each piece of evidence such as: birth certificate, marriage, baptismal, or cemetery record with parents' names, census 1850 or later, explicit Bible record, court document, title page and pertinent pages of annotated publications, DAR *record copy*.

My Gen. (Birth Certificate or equal showing parents) _____

 2nd Gen. _____

 3rd Gen. _____

 4th Gen. _____

 5th Gen. _____

 6th Gen. _____

 7th Gen. _____

 8th Gen. _____

 9th Gen. _____

 10th Gen. _____

 11th Gen. _____

 12th Gen. _____

REFERENCES to Ancestor's Revolutionary War Service _____

I, _____, certify that I meet the eligibility requirements of Article III of the Constitution of the National Society of the Sons of the American Revolution, namely that an applicant must be a male, a citizen of good repute in the community, does not advocate the overthrow of the Government of the United States by use of force or violence, and is the lineal descendant of an ancestor who was at the time of his last known service demonstrated loyalty to, and rendered active service in the cause of American Independence. I further assert that I have examined this completed application and the documentation submitted to prove the facts and statements herein, and to the best of my knowledge and belief, the facts and statements herein are true and correct. I request that the Society act upon my representations and grant me membership.

Signature of Applicant _____ Date _____

Recommended by the undersigned members Sponsor	State Registrar: _____ 2 _____
Name _____	State Secretary: _____
Street/P.O. Box _____	Accepted by the State Board of Management
City/St/Zip _____	(optional): _____ 2 _____
Signed _____	Received at National Hdqrs. _____ 2 _____
NSSAR# _____	Genealogist General: _____ By _____
Co-Sponsor	_____ 2 _____
Name _____	
Signed _____	Registered by NSSAR _____
NSSAR# _____	Registrar General: _____