



Pontius Family Association
Membership Application

Date _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (____) _____ Cell: (____) _____

Email: _____ Date of Birth: _____

Name of Spouse: _____

(If wife, please include maiden name.)

If known, Pontius Number: _____

Second Address Information: If you live in another location part of the year.

Address: _____ City: _____

State: _____ Zip: _____ When are you there? _____

Name of Pontius Ancestor: _____

Relationship of Ancestor: (i.e. grandmother) _____

Where did you hear about the PFA? _____

Membership Fees:

_____ 1 year \$10.00 _____ 2 year \$18.00 _____ 3 year \$27.00

_____ Junior \$3.00 (ages 1-21—will not receive Bridge Builder)

_____ Life (69 and younger) \$120.00 _____ Life (70 and older) \$100.00

Make checks payable to: Pontius Family Association

Mail to: Pontius Family Association, 21810 Fairmount Blvd, Cleveland, OH 44118-4816.

If paying by PayPal, please add \$1.00 to cover the processing fees.

Sign into PayPal and use PontiusTreasurer@gmail.com.