

# SOCIETY OF MAYFLOWER DESCENDANTS IN THE COMMONWEALTH OF PENNSYLVANIA

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## MEMBERSHIP APPLICATION INFORMATION

### OBJECTIVES:

“To perpetuate the memory of our Mayflower Ancestors, and to preserve their records, history and all facts relating to them, their ancestors and their posterity. To maintain and defend the principle of civil and religious liberty as set forth in the Compact of the *Mayflower*, “For ye glorie of God, and advancement of ye Christian faith, and honor of our...Countrie.”

“To cherish and maintain the ideals and institutions of American freedom, and to oppose any theories or actions that threaten their continuity.”

“To transmit the spirit, the purity of purpose and steadfastness of will of the Pilgrim Fathers to those who shall come after us, an undiminished heritage of liberty and law.”

“To secure united effort to discover and publish original matter in regard to the Pilgrims, together with existing data known only to antiquarians, and to authenticate, preserve and mark historical spots made memorable by Pilgrim association.”

— Article II, Constitution of Society in Pennsylvania

### MEMBERSHIP REQUIREMENTS:

Individuals with proof of lineal descent (a “blood line”) from a passenger of the voyage of the *Mayflower* which terminated at Plymouth, New England, in December 1620 shall be eligible for membership. The 29 passengers from whom descent has been proven are:

John Alden	Elizabeth Fisher	Degory Priest
Isaac Allerton	Moses Fletcher	Thomas Rogers
John Billington	Edward Fuller	Henry Samson
William Bradford	Samuel Fuller	George Soule
William Brewster	Stephen Hopkins	Myles Standish
Peter Brown	John Howland	John Tilley
James Chilton	Joan Hurst	Richard Warren
Francis Cooke	Richard More	William White
Edward Doty	William Mullins	Edward Winslow
Francis Eaton	Mary Norris	

Descent from passengers Allerton, Billington, Brewster, Chilton, Cooke, Eaton, Edward Fuller, Hopkins, Mullins, Rogers, Tilley and White includes descent from their wives or children who were passengers aboard the 1620 *Mayflower*.

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## APPLICATION PROCEDURE:

Every applicant shall complete in full a Proposal for Membership (see page 3). Detach and return it to the Historian (genealogist) whose address appears on the bottom of page 3.

Except for Junior (Annual), Transfer or Dual Memberships, the applicant will then be provided with a Worksheet on which the applicant will record the claimed *Mayflower* lineage in detail with documented proof for the claim for each generation. The worksheet will be accompanied by further instructions, aids and suggestions to help in its preparation. The applicant will return the completed Worksheet and documentation to the State Historian with checks for all applicable fees and dues (see below). In the rare event that the application is not accepted, the Membership Certificate Fee and the Dues will be returned. The General Society Examination fee is non-refundable.

Upon approval by the State Historian, the Worksheet will be returned to the applicant with an Application for Membership form. The applicant will carefully type the approved lineage on this form, or use a supplied diskette, on acid free plain paper and return it to the State Historian, who will forward it to the Historian General at the General Society in Plymouth, Massachusetts.

Upon approval by the Historian General, the applicant's name will be presented to the Pennsylvania Society's Board of Assistants for approval of membership. Upon approval by the Board of Assistants, the applicant will be notified of approval by mail.

Application Fees of the Society in Pennsylvania are as follows:

General Society Examination Fee (original and supplemental)*	\$75.00*
Membership Certificate (Original and supplemental)*	\$15.00*

*\*=Not applicable to Junior (Annual), Transfer or Dual Memberships*

### Dues

Regular (Annual): (18 years of age or older)	\$35.00
Life: (one-time single payment) From birth to 10: \$1020; age 11 to 20: \$960; age 21 to 30: \$900; age 31 to 40: \$810; 41 and older: \$700.	
Junior: (must join before 18 <sup>th</sup> birthday)**	\$10.00

**\*\*Junior:** *N.B. This is NOT a documented membership recognized by the General Society of Mayflower Descendants. Membership expires on 25<sup>th</sup> Birthday or when lineage papers are submitted and accepted. Dues are per household, NOT per individual. They do receive newsletters.*

*(A check for the above \$10 Junior (Annual) Dues payable to SMDPA MUST accompany this application.)*

*All Fees and Dues are established by the SMDPA Board of Assistants and are subject to change*

**You may detach and keep pages 1 & 2 for your information**

**EXCEPT FOR JUNIOR (ANNUAL) DUES, PLEASE SEND NO FUNDS AT THIS TIME**

**SOCIETY OF MAYFLOWER DESCENDANTS  
IN THE COMMONWEALTH OF PENNSYLVANIA**

**PROPOSAL FOR MEMBERSHIP  
PLEASE TYPE OR PRINT CLEARLY**

Full Name of Applicant: \_\_\_\_\_  
Prefix: (Mr./Mrs./Miss/Ms./Dr./The Rev./Other): \_\_\_\_\_ Suffix: (MD, PhD, Etc.) \_\_\_\_\_  
Address: \_\_\_\_\_ Apt./Floor: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip+4: \_\_\_\_\_  
Phone: (        ) \_\_\_\_\_ E-mail (Most important): \_\_\_\_\_  
Fax: (        ) \_\_\_\_\_  
Marital Status: \_\_\_\_\_ Full Name of Spouse: \_\_\_\_\_  
Full Maiden Name, if different from above: \_\_\_\_\_  
Date of Birth (mm/dd/yyyy): \_\_\_\_\_ Occupation: \_\_\_\_\_ (before  
retirement) Retired?: ( Yes / No )  
How did you learn of the Society? (General Society) (member) (brochure at historical/genealogical society)  
(genealogical conference) (press/publicity) (TV) (SAIL1620.org website) (other \_\_\_\_\_)  
Name of *Mayflower* ancestor from whom you intend to prove descent: \_\_\_\_\_  
If you are a member of another state Mayflower Society, name of state: \_\_\_\_\_  
Other State Membership #: \_\_\_\_\_ General Society #: \_\_\_\_\_  
Membership category sought:  
 Regular (i.e. Annual - applicants age 18 or older)  
 Life (applicants of any age)  
 Transfer (Regular members only – Life Memberships are not transferable)  
 Dual (applicants of any age) (**also check one of the above**)  
 Junior (Annual - applicants must be under 18 years of age) (membership expires on 25<sup>th</sup> birthday)  
Do you have a relative in any state Mayflower society? (Yes / No)  
If yes, full name of relative: \_\_\_\_\_  
Relationship to you: \_\_\_\_\_ Living: (Yes / No)  
Relative's State Society: \_\_\_\_\_  
Relative's General Society #: \_\_\_\_\_ Relative's State Society #: \_\_\_\_\_  
*Signature of Applicant* (or Sponsor for minor Annual or Life Members)  
\_\_\_\_\_  
If Sponsor, relationship to applicant: \_\_\_\_\_ Date: \_\_\_\_\_  
Sponsor's Name: \_\_\_\_\_  
Sponsor's Address: \_\_\_\_\_  
Sponsor's phone number: (        ) \_\_\_\_\_

**EXCEPT FOR JUNIOR ANNUAL DUES, PLEASE SEND NO FUNDS AT THIS TIME**

**Mail to:** Valerie L. Cullen  
Historian, SMDPA  
1549 Maple Avenue  
Paoli, PA 19301-1249

**Please complete page 4**

**Return pages 3 and 4 to the Historian above.**

## SOCIETY OF MAYFLOWER DESCENDANTS IN THE COMMONWEALTH OF PENNSYLVANIA

**Please complete this form using the full names:**

Date:		Phone:		Email:	
Name:					
Address:					
1. Name of your Mayflower Pilgrim Ancestor:					
2. Son/Daughter:		Married:			
3. Son/Daughter:		Married:			
4. Son/Daughter:		Married:			
5. Son/Daughter:		Married:			
6. Son/Daughter:		Married:			
7. Son/Daughter:		Married:			
8. Son/Daughter:		Married:			
9. Son/Daughter:		Married:			
10. Son/Daughter:		Married:			
11. Son/Daughter:		Married:			
12. Son/Daughter:		Married:			
13. Son/Daughter:		Married:			
14. Son/Daughter:		Married:			
15. Son/Daughter:		Married:			

Your name should be last.