

**First Families & Centennial Families of Norfolk County, Virginia  
Application for Membership**

1. \_\_\_\_\_ (Applicant's Name) declare  
I was born on \_\_\_\_\_ at \_\_\_\_\_  
married on \_\_\_\_\_ at \_\_\_\_\_  
to \_\_\_\_\_ at \_\_\_\_\_  
born on \_\_\_\_\_ at \_\_\_\_\_  
who died on \_\_\_\_\_ at \_\_\_\_\_

I am the biological child of

2. \_\_\_\_\_  
born on \_\_\_\_\_ at \_\_\_\_\_  
died on \_\_\_\_\_ at \_\_\_\_\_  
married to \_\_\_\_\_  
on \_\_\_\_\_ at \_\_\_\_\_  
who was born on \_\_\_\_\_ at \_\_\_\_\_  
died / divorced on \_\_\_\_\_ at \_\_\_\_\_

3. The said \_\_\_\_\_ was the biological child of  
\_\_\_\_\_  
born on \_\_\_\_\_ at \_\_\_\_\_  
died on \_\_\_\_\_ at \_\_\_\_\_  
married to \_\_\_\_\_  
on \_\_\_\_\_ at \_\_\_\_\_  
who was born on \_\_\_\_\_ at \_\_\_\_\_  
died / divorced on \_\_\_\_\_ at \_\_\_\_\_

4. The said \_\_\_\_\_ was the biological child of  
\_\_\_\_\_  
born on \_\_\_\_\_ at \_\_\_\_\_  
died on \_\_\_\_\_ at \_\_\_\_\_  
married to \_\_\_\_\_  
on \_\_\_\_\_ at \_\_\_\_\_  
who was born on \_\_\_\_\_ at \_\_\_\_\_  
died / divorced on \_\_\_\_\_ at \_\_\_\_\_

5. The said \_\_\_\_\_ was the biological child of  
\_\_\_\_\_  
born on \_\_\_\_\_ at \_\_\_\_\_  
died on \_\_\_\_\_ at \_\_\_\_\_  
married to \_\_\_\_\_  
on \_\_\_\_\_ at \_\_\_\_\_  
who was born on \_\_\_\_\_ at \_\_\_\_\_  
died / divorced on \_\_\_\_\_ at \_\_\_\_\_

6. The said \_\_\_\_\_ was the biological child of

born on \_\_\_\_\_ at \_\_\_\_\_  
died on \_\_\_\_\_ at \_\_\_\_\_  
married to \_\_\_\_\_  
on \_\_\_\_\_ at \_\_\_\_\_  
who was born on \_\_\_\_\_ at \_\_\_\_\_  
died / divorced on \_\_\_\_\_ at \_\_\_\_\_

7. The said \_\_\_\_\_ was the biological child of

born on \_\_\_\_\_ at \_\_\_\_\_  
died on \_\_\_\_\_ at \_\_\_\_\_  
married to \_\_\_\_\_  
on \_\_\_\_\_ at \_\_\_\_\_  
who was born on \_\_\_\_\_ at \_\_\_\_\_  
died / divorced on \_\_\_\_\_ at \_\_\_\_\_

The said \_\_\_\_\_ was a resident of Norfolk County,  
Virginia in the year \_\_\_\_\_.

I, \_\_\_\_\_, submit my Application for Membership  
for the  First Families of Norfolk County, Virginia or  Centennial Families of Norfolk County,  
Virginia. I agree that the information submitted with this Application for Membership shall be  
placed in the lateral family files for the Norfolk County Historical Society of Chesapeake.

\_\_\_\_\_  
Applicant's Name

Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_