



www.owenfamilyassociation.org

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For Office Use:

OFA RECORD: Date: _____

Member # _____

OWEN FAMILY ASSOCIATION

APPLICATION FOR MEMBERSHIP

NAME: _____

STREET ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

EMAIL ADDRESS: _____

PHONE: () _____ **OCCUPATION** _____

EARLIEST KNOWN

OWEN ANCESTOR: _____

Please return this application for membership, together with a \$10.00 check, made out to "Owen Family Association." Also, please complete the Ancestral Chart enclosed (or you may use the Pedigree Chart from Family Tree Maker or other genealogy software chart). Show your Owen line as far back as you have traced it. Mail the entire package, Ancestral Chart, Application, Dues Payment Coupon, and check to: Owen Family Association, Genealogist Jane Owen, 4190 Hurricane Shores Dr., Benton, AR 72019

If you have a "brick wall" mystery, or other problems in your family research, please describe briefly: _____

Which delivery do you prefer for the OFA quarterly newsletter? email US Postal Service

Unless otherwise specified, your complete name and contact information will be printed in the OFA Members' Directory or quarterly newsletter. Check the items you approve for publication:

Name Address Phone Email Earliest Owen Ancestor

ABOUT OUR DNA PROJECT: Having your DNA analyzed is not mandatory for membership. However, many of our members have done so and are pleased with the results.

Have you, or a male Owen relative, taken the Y-DNA test to determine to which of the US Owen families you belong?

YES, my family haplotype is _____ Our Owen DNA Project Group Number is _____.

(If you don't know or aren't sure, please leave blank).

NO, but I am interested in doing so. Please contact me at email _____ or USPS mail _____.

NO, thank you, not interested.