



# Society of Colonial Wars

## SUPPLEMENTAL APPLICATION

State Society or  
Independent Chapter No. \_\_\_\_\_

General Society No. \_\_\_\_\_

IN THE \_\_\_\_\_ SOCIETY OF COLONIAL WARS

(State Society or Independent Chapter)

I, the undersigned, hereby apply for membership in the Society by right of lineal descent from

\_\_\_\_\_  
(Qualifying Ancestor)

who was born at \_\_\_\_\_ on \_\_\_\_\_

and was a resident of \_\_\_\_\_ and died on \_\_\_\_\_

at \_\_\_\_\_

THAT THE SERVICES OF \_\_\_\_\_ Gen # \_\_\_\_\_

in the American Colonies upon which this claim of eligibility to membership is based, were as follows:

### AUTHORITIES AS TO SERVICE

\_\_\_\_\_  
I declare upon honor that, if admitted to membership, I will endeavor to promote the purposes of this Society and observe its governing instruments and traditions.

Full name of Applicant: \_\_\_\_\_

Occupation: \_\_\_\_\_

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

City, State, Zip Code: \_\_\_\_\_

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

Phone: Home: \_\_\_\_\_ Cell: \_\_\_\_\_

# AFFIDAVIT

In support of the application for membership of (give full name)

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(State) (City or County)

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1. I, the applicant, \_\_\_\_\_  
was born at \_\_\_\_\_ on \_\_\_\_\_  
Spouse of: \_\_\_\_\_  
who was born at \_\_\_\_\_ on \_\_\_\_\_  
died at \_\_\_\_\_ on \_\_\_\_\_  
married at \_\_\_\_\_ on \_\_\_\_\_  
Proof:

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The said, \_\_\_\_\_ is the child of

2. \_\_\_\_\_  
was born at \_\_\_\_\_ on \_\_\_\_\_  
died at \_\_\_\_\_ on \_\_\_\_\_  
Husband of: \_\_\_\_\_  
who was born at \_\_\_\_\_ on \_\_\_\_\_  
died at \_\_\_\_\_ on \_\_\_\_\_  
married at \_\_\_\_\_ on \_\_\_\_\_  
Proof:

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The said, \_\_\_\_\_ is the child of

3. \_\_\_\_\_

was born at \_\_\_\_\_ on \_\_\_\_\_

died at \_\_\_\_\_ on \_\_\_\_\_

Husband of: \_\_\_\_\_

who was born at \_\_\_\_\_ on \_\_\_\_\_

died at \_\_\_\_\_ on \_\_\_\_\_

married at \_\_\_\_\_ on \_\_\_\_\_

Proof:

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The said, \_\_\_\_\_ is the child of

4. \_\_\_\_\_

was born at \_\_\_\_\_ on \_\_\_\_\_

died at \_\_\_\_\_ on \_\_\_\_\_

Husband of: \_\_\_\_\_

who was born at \_\_\_\_\_ on \_\_\_\_\_

died at \_\_\_\_\_ on \_\_\_\_\_

married at \_\_\_\_\_ on \_\_\_\_\_

Proof:

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The said, \_\_\_\_\_ is the child of

5. \_\_\_\_\_

was born at \_\_\_\_\_ on \_\_\_\_\_

died at \_\_\_\_\_ on \_\_\_\_\_

Husband of: \_\_\_\_\_

who was born at \_\_\_\_\_ on \_\_\_\_\_

died at \_\_\_\_\_ on \_\_\_\_\_

married at \_\_\_\_\_ on \_\_\_\_\_

Proof:

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The said, \_\_\_\_\_ is the child of

6. \_\_\_\_\_

was born at \_\_\_\_\_ on \_\_\_\_\_

died at \_\_\_\_\_ on \_\_\_\_\_

Husband of: \_\_\_\_\_

who was born at \_\_\_\_\_ on \_\_\_\_\_

died at \_\_\_\_\_ on \_\_\_\_\_

married at \_\_\_\_\_ on \_\_\_\_\_

Proof:

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The said, \_\_\_\_\_ is the child of

7. \_\_\_\_\_

was born at \_\_\_\_\_ on \_\_\_\_\_

died at \_\_\_\_\_ on \_\_\_\_\_

Husband of: \_\_\_\_\_

who was born at \_\_\_\_\_ on \_\_\_\_\_

died at \_\_\_\_\_ on \_\_\_\_\_

married at \_\_\_\_\_ on \_\_\_\_\_

Proof:

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The said, \_\_\_\_\_ is the child of

8. \_\_\_\_\_

was born at \_\_\_\_\_ on \_\_\_\_\_

died at \_\_\_\_\_ on \_\_\_\_\_

Husband of: \_\_\_\_\_

who was born at \_\_\_\_\_ on \_\_\_\_\_

died at \_\_\_\_\_ on \_\_\_\_\_

married at \_\_\_\_\_ on \_\_\_\_\_

Proof:

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The said, \_\_\_\_\_ is the child of

9. \_\_\_\_\_

was born at \_\_\_\_\_ on \_\_\_\_\_

died at \_\_\_\_\_ on \_\_\_\_\_

Husband of: \_\_\_\_\_

who was born at \_\_\_\_\_ on \_\_\_\_\_

died at \_\_\_\_\_ on \_\_\_\_\_

married at \_\_\_\_\_ on \_\_\_\_\_

Proof:

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The said, \_\_\_\_\_ is the child of

10. \_\_\_\_\_

was born at \_\_\_\_\_ on \_\_\_\_\_

died at \_\_\_\_\_ on \_\_\_\_\_

Husband of: \_\_\_\_\_

who was born at \_\_\_\_\_ on \_\_\_\_\_

died at \_\_\_\_\_ on \_\_\_\_\_

married at \_\_\_\_\_ on \_\_\_\_\_

Proof:

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The said, \_\_\_\_\_ is the child of

11. \_\_\_\_\_

was born at \_\_\_\_\_ on \_\_\_\_\_

died at \_\_\_\_\_ on \_\_\_\_\_

Husband of: \_\_\_\_\_

who was born at \_\_\_\_\_ on \_\_\_\_\_

died at \_\_\_\_\_ on \_\_\_\_\_

married at \_\_\_\_\_ on \_\_\_\_\_

Proof:

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The said, \_\_\_\_\_ is the child of

12. \_\_\_\_\_

was born at \_\_\_\_\_ on \_\_\_\_\_

died at \_\_\_\_\_ on \_\_\_\_\_

Husband of: \_\_\_\_\_

who was born at \_\_\_\_\_ on \_\_\_\_\_

died at \_\_\_\_\_ on \_\_\_\_\_

married at \_\_\_\_\_ on \_\_\_\_\_

Proof:

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The said, \_\_\_\_\_ is the child of

13. \_\_\_\_\_

was born at \_\_\_\_\_ on \_\_\_\_\_

died at \_\_\_\_\_ on \_\_\_\_\_

Husband of: \_\_\_\_\_

who was born at \_\_\_\_\_ on \_\_\_\_\_

died at \_\_\_\_\_ on \_\_\_\_\_

married at \_\_\_\_\_ on \_\_\_\_\_

Proof:

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The said, \_\_\_\_\_ is the child of

14. \_\_\_\_\_

was born at \_\_\_\_\_ on \_\_\_\_\_

died at \_\_\_\_\_ on \_\_\_\_\_

Husband of: \_\_\_\_\_

who was born at \_\_\_\_\_ on \_\_\_\_\_

died at \_\_\_\_\_ on \_\_\_\_\_

married at \_\_\_\_\_ on \_\_\_\_\_

Proof:



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The said, \_\_\_\_\_ is the child of

15. \_\_\_\_\_

was born at \_\_\_\_\_ on \_\_\_\_\_

died at \_\_\_\_\_ on \_\_\_\_\_

Husband of: \_\_\_\_\_

who was born at \_\_\_\_\_ on \_\_\_\_\_

died at \_\_\_\_\_ on \_\_\_\_\_

married at \_\_\_\_\_ on \_\_\_\_\_

Proof:

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The said, \_\_\_\_\_ is the child of

16. \_\_\_\_\_

was born at \_\_\_\_\_ on \_\_\_\_\_

died at \_\_\_\_\_ on \_\_\_\_\_

Husband of: \_\_\_\_\_

who was born at \_\_\_\_\_ on \_\_\_\_\_

died at \_\_\_\_\_ on \_\_\_\_\_

married at \_\_\_\_\_ on \_\_\_\_\_

Proof:

**ADDITIONAL PROOF DOCUMENTS** (Place Generation number at the beginning of each line)

And applicant further says that the said \_\_\_\_\_  
(Name of ancestor from whom eligibility is derived)

is the ancestor in the foregoing application, that the facts presented in the foregoing application are true to the best of his knowledge and belief. The generational line from the applicant to the ancestor, is lineal descent by blood to the best of the applicant's knowledge.

Must be endorsed by one of the following officers of the submitting State Society or Independent Chapter: Examined and approved by (choose one)

Secretary                      Registrar                      Genealogist

\_\_\_\_\_  
(Signature of Applicant)

\_\_\_\_\_  
(Signature)

Date: \_\_\_\_\_

Date: \_\_\_\_\_

GSCW # \_\_\_\_\_ SS / IC# \_\_\_\_\_

APPLICATION FOR MEMBERSHIP OF

\_\_\_\_\_  
IN RIGHT OF  
\_\_\_\_\_

\_\_\_\_\_  
**Society of Colonial Wars**

Examined by the office of the Registrar General, GSCW

\_\_\_\_\_  
(Signature of the Reviewing Genealogist, GCSW)

Date: \_\_\_\_\_