

|  | FIRST | MIDDLE | MAIDEN | LAST |
| --- | --- | --- | --- | --- |
| Member |  |  |  |  |
| Spouse |  |  |  |  |
| Member Address |  |  |  |  |
| Member Email Address |  |  |  |  |
| Member Telephone |  |  |  |  |
| Member occupation |  |  |  |  |
| Member Date of Birth |  |  |  |  |
| Child’s Name |  | Date of Birth |  |  |
| Child’s Name |  | Date of Birth |  |  |
| Child’s Name |  | Date of Birth |  |  |
| Child’s Name |  | Date of Birth |  |  |
|  |  |  |  |  |

Certifying your alden lineage

Members who would like to certify their Alden lineage are invited to complete the synopsis below.

Upon enrollment as an AKA member and with payment of your lineage certification fee, our Genealogists will assist you with your documentation and prepare a statement of lineage. The lineage application fee is $75 for individuals and $100 for families (member, spouse, children under 21 residing at same address).

If you have not yet done so, please complete your membership enrollment form first. Additional information can be found online at [www.alden.org](http://www.alden.org) or by contacting us at genealogy@alden.org .

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| --- |
| Do you have a relative who is already a member of AKA or another lineage society? |
| Name |  | Member # |  |
| Other Society |  | Member # |  |



| John Alden | Priscilla Mullins |
| --- | --- |
| (Son or daughter through whom line descends) | (spouse of line carrier) |
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aKA lineage Synopsis

You will receive a more extensive lineage form when your AKA lineage synopsis is received. At that time, you will be asked to submit all your documentation (copies of birth, death, and marriage certificates) from your own generation back in time to an ancestor in the *Mayflower Families Through 5 Generations v. 16, parts 1-4,* silver books series or to an approved AKA family member.

Our genealogists are available to guide you through the process. You are welcome to contact us at genealogy@alden.org or by calling 781.934.9092. Visit our FAQ online at [www.alden.org](http://www.alden.org).

My check for $\_\_\_\_\_\_\_\_ payable to Alden Kindred of America is enclosed.

Please charge my credit card — Credit Card #: Expiration Date: \_\_\_\_\_\_\_\_

Mail the AKA lineage application and worksheet to:

Alden Kindred of America, PO Box 2754, Duxbury, MA 02331-2754.