



MONTANA STATE GENEALOGICAL SOCIETY

First Families Of Montana and Early Settlers Of Montana Certificate Application

Instructions to applicant: Fill in all blanks, beginning with yourself as #1. Type or print all information. A check or money order for \$10.00 must accompany each application.

1. Applicant's Name: _____

as it is to appear on certificate

(street address)

(city/town, state, zip code)

Phone #

Email Address:

Relationship to Ancestor
(Example: Great Grandson)

2. Name of Ancestor

(OR couple):

as it is to appear on certificate

(who was in Montana before 8 November 1889/9 or from
November 1889 thru 31 December 1929)

Birth

(date) (place)

Death

(date) (place)

Buried

(date) (place)

Marriage

(date) (place)

Spouse

(name - maiden name when applicable)

Birth

(date) (place)

Death

(date) (place)

3. Where in Montana
did ancestor first
appear:

_____ (city, town, village, county)*
* Use County name as it is today if it has changed
When? _____ Emigrated
(date)
From _____
(town, county, state, province, country)

I do or don't have a photograph of my ancestor to share for the
Publication (Please send Good Quality, Scannable photo
with application)

Please mail, or hold for presentation at the next annual MSGS
Conference

RELEASE FORM: Permission is granted by me to use materials I have submitted
for a future publication by the Montana State Genealogical Society, honoring our
Montana ancestors.

Signature of certificate applicant Date

I do not wish to have the following published in the
First Families of Montana Book (Please check
appropriate box)

Address
 Phone Number
 Email Address

Send Applications and Pedigree Chart to:
First Families of MT Applications
P.O. Box 1012
Condon, MT. 59826
For More information Visit our web site:
<http://www.rootsweb.com/~mtmsg>

FOR MSGS USE ONLY:

File # _____
Name: _____

(ancestor)
Date Rec: _____
Date Ret: _____
(for further data)
Date Completed: _____
Date Certificate
Issued: _____
Comments: _____

