

PIONEER CERTIFICATE APPLICATION

____ Allegan County
____ Kalamazoo County

____ Cass County
____ Van Buren County
(please, check one)

____ Berrien County

Please use black ink or type this application.

Surnames must be in CAPITAL letters, and all dates must be shown as examples,
Jan 1, 2010 or 1 Jan 2010.

Enter places as city/village/township, county, state/country.

Attach proofs of lineage to the back of these forms and put them in Generation order
(Generation #1 is the applicant). Send copies only, originals will not be returned.
When completed mail all documents along with a check or money order for \$17.00 to:

VBRGS Pioneer Certificate Project

P.O. Box 143

Decatur, MI 49045

Applicant: _____

Address: _____

City: _____ State: _____ Zip: _____

Name as should appear on certificate: _____

Additional certificates for children or parents of applicant may be obtained for an
additional \$3.00 each. Name(s) for additional certificates as they should appear:

Pioneer Ancestor:

Name: _____

Date and place of earliest residence: _____

Proof of early residence: _____

Birth date and place: _____

Death date and place: _____

Spouse: _____

Marriage date and place: _____

Spouse birth date and place: _____

Spouse's parents: _____

Military Service: _____

From where did ancestor emigrate: _____

When: _____

Lineage:

1. Applicant: _____

Born: _____ Place: _____

Residence: _____

Spouse: _____ Marriage Date _____

Place: _____

2. Child of: _____ and _____

Born: _____ Born: _____

Married: _____

Died: _____ Died: _____

3. Child of: _____ and _____

Born: _____ Born: _____

Married: _____

4.	Died: _____	Died: _____
Child of:	_____	and _____
Born:	_____	Born: _____
Married:	_____	
5.	Died: _____	Died: _____
Child of:	_____	and _____
Born:	_____	Born: _____
Married:	_____	
6.	Died: _____	Died: _____
Child of:	_____	and _____
Born:	_____	Born: _____
Married:	_____	
7.	Died: _____	Died: _____
Child of:	_____	and _____
Born:	_____	Born: _____
Married:	_____	
8.	Died: _____	Died: _____
Pioneer Ancestor:	_____	
Children:	Born: _____	_____
	_____	_____
	_____	_____
	_____	_____
	_____	_____
	_____	_____

Please list proofs by generation beginning with generation #1
(label proofs with generation #)

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____

I understand that the information enclosed on this application and the attached proofs will become the property of the Van Buren Regional Genealogical Society and will be made available for future researchers. I also understand that the \$10.00 fee is non-fundable and that my application is subject to the approval of the Pioneer Certificate Committee.

Signature: _____ Date: _____

VBRGS Use Only:

Ancestor: _____ Applicant: _____
 Date Received: _____ File Number: _____
 Date Returned for additional information/corrections: _____

Date Approved: _____ Approved By: _____

Memo: _____

