

PVCWC Membership / Renewal Application Form

*I/we would like to begin/continue membership in the Pommerscher Verein of Central Wisconsin Corp.
I understand that membership includes a Dat Pommersche Blatt subscription,
available in electronic or print form.*

YOUR INFORMATION (Complete *italicized* items if they apply, use back of form if you need more space)

Name: First _____ Mid. Initial ____ *Maiden* _____ Last _____

Phone #1: (____) _____ - _____ Phone #2: (____) _____ - _____ Email: _____

Spouse: First _____ Mid. Initial ____ *Maiden* _____ Last _____

Phone #1: (____) _____ - _____ *Phone #2:* (____) _____ - _____ *Email:* _____

Facebook Display Name: _____

Principal Address: _____ Check if New Address ☐

City: _____ State: _____ Zip Code: _____

Alternate Address: _____ *Check if New Address* ☐

City: _____ *State:* _____ *Zip Code:* _____ *Dates at this Address:* _____

Family Members Under 18 (included as family): _____

MEMBERSHIP CATEGORIES (SELECT ONE)

New Family (\$30.00) ☐

Renewing Family (\$25.00) ☐

New Single (\$25.00) ☐

Renewing Single (\$20.00) ☐

Please send me *Dat Pommersche Blatt*,
the PVCW newsletter, in (select one):

☐

Print Format

☐

Electronic Format

Enclosed is check number _____ dated ____/____/____ in the amount of \$ _____

Please clip & return to:

Pommerscher Verein Central Wisconsin Inc.

P.O. Box 103

Wausau, WI 54402-0103

TOWN OF ORIGIN PROJECT FORM 2026

Where's Your *Pommern* Hometown(s)?

If you have located your ancestral place(s) of origin in Pomerania, please provide us that information on the form below and return it to us, so it can be added to our Town of Origin database.

If you don't know your hometown(s), maybe we can help!

Member Name _____ Family Surname _____ Town _____ Kreis _____

Member Name _____ Family Surname _____ Town _____ Kreis _____

Member Name _____ Family Surname _____ Town _____ Kreis _____