

Palatines to America
Founded 1975

Kocherthal Circle or The deGraffenreid Circle
Application

Date Received: _____
Check Number: _____
Fee Received: _____
Membership Year: _____

INSTRUCTIONS TO APPLICANT:

- Please read the *Rules and Procedures* before completing this application. Do not write in shaded areas. List your main ancestral line starting on pages 2. Begin with yourself as #1. A red box is a required field.
- Type or print all information.
- Write specific document number(s) at the end of each application line to indicate source(s) of information.
- List and number proof documents that accompany the application on the Documents List page. A numbered, typed list may be submitted for the document.
- Please sign and date the application on the Certification page.

This application is for (select one): **The Kocherthal Circle** **The deGraffenreid Circle**

Applicant's Name _____
First Name Middle Name Maiden Name Last Name

Street Address _____

Town, State, Zip _____

E-mail Address _____ **Telephone Number** _____

Palatines to America Member Number _____

If this is a supplement:

The Kocherthal Circle Member Number: _____

The deGraffenreid Circle Member Number: _____

This application is for descendency from _____.

Please make check payable to National Palatines to America.

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1. I, _____
First Name / Middle and/or Maiden Name / Last Name _____ Doc # _____
was born on _____ at _____ Doc # _____
City / County / State _____
on _____ at _____ Doc # _____
City / County / State _____
married to _____ Doc # _____
City / County / State _____
born on _____ at _____ Doc # _____
City / County / State _____
died on _____ at _____ Doc # _____
City / County / State _____
2. I am the child of _____ Doc # _____
born on _____ at _____ Doc # _____
City / County / State _____
died on _____ at _____ Doc # _____
City / County / State _____
and spouse _____ Doc # _____
City / County / State _____
born on _____ at _____ Doc # _____
City / County / State _____
died on _____ at _____ Doc # _____
City / County / State _____
married on _____ at _____ Doc # _____
City / County / State _____
3. The said _____ is the · son · daughter _____ Doc # _____
of _____ Doc # _____
born on _____ at _____ Doc # _____
City / County / State _____
died on _____ at _____ Doc # _____
City / County / State _____
and spouse _____ Doc # _____
City / County / State _____
born on _____ at _____ Doc # _____
City / County / State _____
died on _____ at _____ Doc # _____
City / County / State _____
married on _____ at _____ Doc # _____
City / County / State _____

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4. The said _____ is the · son · daughter
of _____ Doc # _____
born on _____ at _____ Doc # _____
City / County / State
died on _____ at _____ Doc # _____
City / County / State
and spouse _____ Doc # _____
City / County / State
born on _____ at _____ Doc # _____
City / County / State
died on _____ at _____ Doc # _____
City / County / State
married on _____ at _____ Doc # _____
City / County / State

5. The said _____ is the · son · daughter
of _____ Doc # _____
born on _____ at _____ Doc # _____
City / County / State
died on _____ at _____ Doc # _____
City / County / State
and spouse _____ Doc # _____
City / County / State
born on _____ at _____ Doc # _____
City / County / State
died on _____ at _____ Doc # _____
City / County / State
married on _____ at _____ Doc # _____
City / County / State

6. The said _____ is the · son · daughter
of _____ Doc # _____
born on _____ at _____ Doc # _____
City / County / State
died on _____ at _____ Doc # _____
City / County / State
and spouse _____ Doc # _____
City / County / State
born on _____ at _____ Doc # _____
City / County / State
died on _____ at _____ Doc # _____
City / County / State
married on _____ at _____ Doc # _____
City / County / State

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7. The said _____ is the · son · daughter
 of _____ Doc # _____
 born on _____ at _____ Doc # _____
City / County / State
 died on _____ at _____ Doc # _____
City / County / State
 and spouse _____ Doc # _____
City / County / State
 born on _____ at _____ Doc # _____
City / County / State
 died on _____ at _____ Doc # _____
City / County / State
 married on _____ at _____ Doc # _____
City / County / State

8. The said _____ is the · son · daughter
 of _____ Doc # _____
 born on _____ at _____ Doc # _____
City / County / State
 died on _____ at _____ Doc # _____
City / County / State
 and spouse _____ Doc # _____
City / County / State
 born on _____ at _____ Doc # _____
City / County / State
 died on _____ at _____ Doc # _____
City / County / State
 married on _____ at _____ Doc # _____
City / County / State

9. The said _____ is the · son · daughter
 of _____ Doc # _____
 born on _____ at _____ Doc # _____
City / County / State
 died on _____ at _____ Doc # _____
City / County / State
 and spouse _____ Doc # _____
City / County / State
 born on _____ at _____ Doc # _____
City / County / State
 died on _____ at _____ Doc # _____
City / County / State
 married on _____ at _____ Doc # _____
City / County / State

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___. The said _____ is the · son · daughter
of _____ Doc # _____
born on _____ at _____ Doc # _____
died on _____ at _____ City / County / State Doc # _____
and spouse _____ Doc # _____
born on _____ at _____ City / County / State Doc # _____
died on _____ at _____ City / County / State Doc # _____
married on _____ at _____ City / County / State Doc # _____

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born on _____ at _____ City / County / State Doc # _____
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This page may be copied if necessary.

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CERTIFICATION

I, _____, do hereby swear/attest that the statements set forth in this application are true to the best of my knowledge and belief. By signing and submitting this application I acknowledge that this document and all attachments become the property of Palatines to America and I give permission for this information to be published.

Signature of Applicant _____ Date _____
(This application must be signed by the applicant.)

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