

Daughters of CSA Officers Corps  
Application for membership Instructions

Read before starting

1. Use black ink to fill membership form.
2. Use the ancestor form if you are joining through a direct ancestor as a grandfather or uncle.
3. Use the ancestor form and the common ancestor form if you are joining through a cousin. Complete the ancestor form to the common ancestor. Using the common ancestor form start with the common ancestor (the relative that is blood relation to both lines) and complete to cousin who is an officer or official.
4. Use the associate form if you are a wife of MOSB member and have no lineage, if you are working on your lineage to join, or if you have an interest in the Organization.
5. Proofs:
  - a. Proofs to be sent are copies of birth certificates, marriage certificates, wills, family bibles copies or other documents.
  - b. If you are joining on an ancestor that you have proven through the UDC, the proofs to be sent with the completed application and fees are a copy of that certificate and proof of his office or rank. If a blood relative is joining through your UDC proven ancestor, proof needed is relationship to UCD member, copy of relative's UCD certificate, proof of office or rank, and completed membership form and fees.
  - c. If you are a blood relative of a MOSB member, you need to provide proof of your relationship to that member and a copy of his MOSB certificate. This is for daughters, sisters, or other blood relatives.
6. The completed application with proofs and a fee \$40 made to Treasurer of Daughters of CSA Officers Corps should be mailed:  
Golda Foster-McMahon  
Registrar General  
PO Box 3311  
San Angelo, Tx 76902

Daughters of CSA Officers Corps  
Membership Application

Name: \_\_\_\_\_  
Mailing address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_  
Email: \_\_\_\_\_

Confederate ancestor information

Name: first \_\_\_\_\_ middle \_\_\_\_\_ last \_\_\_\_\_

Ancestor's service to Confederacy:

Military \_\_\_ Civil service \_\_\_ Material aid to the Cause \_\_\_

For Military Service:

Unit: \_\_\_\_\_ State: \_\_\_\_\_

Rank: \_\_\_\_\_

Enlisted Date: \_\_\_\_\_ Location: \_\_\_\_\_

Final Date: \_\_\_\_\_ Location: \_\_\_\_\_

Killed \_\_\_ Paroled \_\_\_ Resigned \_\_\_ released on oath \_\_\_

For Civil Service \_\_\_ or Material Aid to the Cause \_\_\_

Describe the service, location, dates, and any information that relates to this service.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

.....  
Signature of Applicant: \_\_\_\_\_

Signature of Registrar: \_\_\_\_\_

Date: \_\_\_\_\_