



DESCENDANTS OF WHALING MASTERS, INC. APPLICATION FOR MEMBERSHIP

I. PERSONAL DATA:

DESCENDANT RELATIVE CREW FAMILY :

ASSOCIATE :

Name:

Name:

Address:

Address:

E-mail Address:

E-mail Address:

Current or Last Occupation:

Current or Last Occupation:

Telephone:

Telephone:

How did you find out about our organization?

List dependent children & ages if applying for family membership:

II. TYPE OF MEMBERSHIP (please indicate):

- DESCENDANT** (direct descendant of a whaling master) \$25/year \$250/life
 - RELATIVE** (indirect relationship to a whaling master or crew; i.e. niece, nephew) \$25/year \$250/life
 - CREW** (direct descendant of a whaleman) \$25/year \$250/life
 - ASSOCIATE** (spouse of a descendant, relative or crew member) \$20/year \$200/life
 - FAMILY** (descendants, relative or crew, spouses and their direct family members under the age of 21) \$50/year N/A
- CONTRIBUTING:**
- Interested individuals \$25/year N/A
 - Business/Organizations \$100/year

III. PROOF OF MEMBERSHIP:

Whaling Master Ancestor: _____
(name in full)

Name of Ship(s): _____ Dates of Voyages (if known): _____

Relationship of Applicant to Whaling Master: _____

Verification: (Documentation of Whaling Master Ancestor – log on to whalingmasters.org/page2 “Favorite Links” for add'l. resources)*
(please check one)

1. Directory of “WHALING MASTERS,” published by Old Dartmouth Historical Society.
2. Information from Whaling Archive Room of library of museum (state location, and if possible, have official write statement).
3. Papers of Commission/Assignment. Attach Xerox or witnessed statement if possible.
4. Other (letters, newspaper clippings, citations, etc.). Attach Xerox copy of witnessed statement if possible.
5. Judith Lund’s *Whaling Masters and Whaling Voyages Sailing from American Ports: A Compilation of Sources*
6. National Maritime Digital Library Search: <https://nmdl.org/projects/aoww/aoww/>
7. Starbuck’s *History of the American Whale Fishery*

Note: Some may prefer to show documentation in form of letter, citation, commission, etc., to Membership Committee.

Signature of Applicant: _____ Date of Application: _____

*If you are unable to document ancestor by Item Nos. 2, 3, or 4 and have no access to the “WHALING MASTER” directory, please send in application request, and the Committee will check the book for you. Membership Committee E-mail: cscout53@yahoo.com.