

First Families of Wythe County
Application Form

**Full name as it is to appear on certificate,
print or type all information**

Full Name: _____

Address: _____

City/State/Zip: _____

Phone: _____

E-Mail: _____

Ancestor of the applicant proven to have settled within Wythe County, Virginia on or before December 31, 1810.

Name of Ancestor _____

Year Settled _____

Ancestor Came from
(if known) _____

I understand that upon submission of my application, including all supporting data and documents accompanying the application; become the property of the Wythe County Genealogical and Historical Association.

I, _____ do hereby swear/affirm that the statement set forth in this application are true to the best of my knowledge and belief.

Signature of
Applicant _____

Date: _____

Application fee: \$20.00
Make checks or money orders payable to:
Wythe County Genealogical & Historical Association
P. O. Box 1601
Wytheville, VA 24382
website: www.wythecogha.com
email: wythecogha@gmail.com