Swan River Pioneers 1829-1838 (Inc.)

Email: info@swanriverpioneers.com Postal: PO Box 2672, Ellenbrook WA 6069

An Affiliated Member of: Family History WA Inc. & Royal WA Historical Society Inc.



Contacts:

Certificate Registrar: Maureen Scorer ~ 0412 099 018 Secretary: Kim Edwards ~ 0426 831 733

APPLICATION FOR CERTIFICATE OF DESCENDANCY

I				
		[PLEASE PRINT IN BLOCK	K LETTERS FULL NAME OF APP	PLICANT]
of				
State/C	Country		Postcode	
Email:				Phone:
	I wish to have my Ce	ertificate presented at the next Swan	River Pioneers function.	
DETAI	LS OF PIONEER/S F	ROM WHOM DESCENT IS CLAIM	ED:	
1)	Surname:		Given Nam	es:
2)	Surname:		Given Name	98:
Arriva	l, or earliest date kno	own, in the Swan River Colony:		
1)	Date:		Ship:	
2)	Date:		Ship:	
2500				
	ENDANCY STATEME direct descendant of:			who resided in the Swan
River C	Colony of Western Au		Relationship to applicant is	shown in statement or lineal descent on page 3 of
	plication.	a made by me are true and correct	In the event of my Applie	ation being approved. Lagrage to be bound by the
Rules	of the Swan River Pio	neers 1829 – 1838 Inc. for the time	being in force.	ation being approved, I agree to be bound by the
I give p	permission for my info	rmation to be photocopied or used for	or research by authorised S	wan River Pioneer Research Officers.
Yes / I	do give permission.	No / I do not give permission.	[Please underline applicat	ole statement.]
Signat	ture of Applicant:			. Date:
OFFIC	E USE ONLY: Certif	icate Registrar		
Applic	ation No:	Date:	F	Receipt Number:

Proofs Accepted: _____ Certificate Numbers: _

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SWAN RIVER PIONEERS INFORMATION SHEET

1. AIMS AND OBJECTIVES OF THE GROUP

- a) To perpetuate and honour the memory of the early settlers for their enduring hardships and difficulties of the early years of the Colony.
- b) To complete biographical and genealogical data of the pioneers and their families.
- c) To collect and preserve material of any nature which illustrates any aspect of pioneers' settlement in the Swan River Colony of Western Australia.

2. GROUP MEMBERSHIP

- a) Membership of the Group is open to those whose ancestors settled in the Colony between 1 June 1829 and 31 December 1838 and people who are interested in the history of the Swan River Colony, including those who want to discover if they are descendants of the earliest pioneers.
- b) Associate Membership of the Group will be granted to those organisations which have a genuine interest in the Early Pioneers of Western Australia.
- c) The Certificate Registrar of the Swan River Pioneers shall determine Certified Membership.

3. INFORMATION REQUIRED FOR CERTIFICATE OF DESCENDANCY

- a) The line of descent form must be completed, starting from the first pioneer who arrived in the Colony between 1829 1838. (See Application for Certificate of Descendancy.)
- b) Provide some Proof of Identity to confirm your name and address, eg Driver's Licence, utilities bill, Senior's Card.

APPLICANTS - PLEASE NOTE THESE FURTHER INSTRUCTIONS

- 1. Please be sure to sign the Form before forwarding.
- 2. Documents must be legible.
- 3. Photocopies should be clear, full size and complete.
- 4. To become a Member there is a joining fee of \$30.00 (please complete an Application for Swan Rivers Pioneer Membership) and \$25.00 for the Certificate (please complete an Application for Certificate of Descendancy Form). The \$55.00 also includes a Swan River Pioneers Badge and an email subscription to the four quarterly editions of the Gazette.
- 5. Two or more applicants in the same household including spouse, children and grandchildren, and only one newsletter is required, the second applicant's fee will be \$20.00 for the first certificate.
- 6. Where a Certificate of Descendancy recipient has more than one ancestor arriving in the Swan River Colony during the specified period and can prove their direct descendancy, extra Certificates are supplied at a cost of \$6.00 per additional ancestor.

<u>Direct Line of Descent:</u> GENERATION 1 BEING THE FIRST PIONEER TO ARRIVE IN THE SWAN RIVER COLONY

GENERATION	FULL NAME	BIRTH DATE	BIRTH PLACE	MARRIAGE DATE	TO WHOM / PLACE	DATE OF DEATH	PLACE OF DEATH
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
3.2							

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Contacts: Secretary: Kim Edwards ~ 0426 831 733 Certificate Registrar: Maureen Scorer ~ 0412 099 018

CERTIFICATE PAYMENT NOTICE

Full Name: [Dr/Mr/Mrs/Miss/Ms	5]					
Address:						
State/Country:		Phone:				
Email:						
descend from the following Fa	mily / Families:					
The preferred method of	payment is by Direct Depo	sit to our Bank A	ccount.			
Description: Surname ar	ver Pioneers BSB: 016 352 nd Suburb/Town you have paid and email or post you	our Payment Notice to				
CREDIT CARD: VISA / MAST	ERCARD (Please circle relevant ca					
Cardholder Name:	[PLEASE PRIN	T NAME]				
Card Number:	/	/	/			
Expiry Date://	Verification Code:		(the 3 numbers on the bac	ck of your card)		
Signature:						
	VAN RIVER PIONEERS and mailed 2672, ELLENBROOK WA 6069	, with this form, to:				
Please tick the box if yo	ou require a Receipt.					
OFFICE USE ONLY						
Send a copy of this form to: Th	e Treasurer, Swan Rivers Pioneer	1829-1838 Inc.				
For Certificate Numbers:						
Signed:			[Certificate Red	nistrar SRP1		