



**ÖSTERREICHISCHE GESELLSCHAFT FÜR FAMILIEN-  
UND REGIONALGESCHICHTLICHE FORSCHUNG (ÖFR)**

Registered at: A-1160 Vienna, Habichergasse 31/19 c/o Dipl.-Ing. Leopold Strenn  
ZVR 1250545833

**Membership application as a full member (associated member)**

To

ÖSTERREICHISCHE GESELLSCHAFT FÜR FAMILIEN- UND  
REGIONALGESCHICHTLICHE FORSCHUNG (ÖFR)

By signing this membership application, I request full membership in the Austrian Society for Research on Genealogy and Regional Heritage (ÖFR) with a reduced membership fee available to qualified members, and hereby give my permission that my personal data may be used and stored electronically by the above-mentioned society for internal purposes, invitations, announcements and information.

The current reduced annual membership fee is EUR 12,-.

**I qualify for the reduced fee:**

As an associated member to

Last name, first name and title of main member: \_\_\_\_\_

Degree of relationship: \_\_\_\_\_

As a student under the age of 25

Upon being on military or alternative service

**Contact details:**

**Last name:** \_\_\_\_\_

**First name:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Address (ZIP, city):** \_\_\_\_\_

**Street, Nr.:** \_\_\_\_\_

**Country:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Mobile:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Website:** \_\_\_\_\_

**Born on / in:** \_\_\_\_\_

**Main areas of research:** \_\_\_\_\_

**Username:** \_\_\_\_\_

**City:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Please send your signed membership application to: ÖFR c/o Dipl.-Ing. Leopold Strenn,  
Habichergasse 31/19, 1160 Vienna, Austria or mail the signed form to [members@oefr.at](mailto:members@oefr.at)**