

The Military Order of the Stars and Bars



J. RANDY KERLIN, GENEALIST GENERAL
3319 SE 4TH STREET
OCALA, FL 34471-2917

MOS&B Membership Applications

The preferred method to join the MOS&B is through the Chapter in your area. To determine the closest Chapter, contact our International Headquarters headquarters@mosbihq.org or 877-790-6672. Our Headquarters can guide you through the process and see that you are placed in contact with a convenient Chapter or if no Chapter is available, you will be placed in an At-Large Chapter until such time as a local Chapter has been established.

All of the forms necessary to join are located on this site. They may be filled out and printed from your computer.

- Fill in the Family information starting with your name going back step by step back to your Confederate ancestor.
- Fill in all the dates and locations as far as possible.
- Proof: This should be provided to the extent practical using birth, census, marriage and military records. If there is a problem with any of this information, please call our Genealogist General, Randy Kerlin (352) 362-1708, who can assist you with any problems you might experience. (Please make every effort to supply this information as it will be held for future genealogical research for others to use.)
- **Proof of Confederate Service as an Officer is Mandatory.**
- Each application must be signed by the applicant and countersigned by the individual recommending the applicant and the local Chapter officer.
- Two copies of the application with supporting documentation along with a check in the amount of fifty dollars (\$50) payable to the MOS&B National should be sent to the Genealogist General Randy Kerlin, 3319 SE 4th St., Ocala, Fla. 34471-2917
- The fifty dollar (\$50) fee covers the application process and the membership dues for the year of application. Dues are calculated from 1 September.
- Life Memberships are available after the individual has been accepted for regular membership (see Life Membership).

Membership in the MOS&B is available upon approved service of a Confederate Officer who was of Lineal or Collateral ancestry and served with honor. (Cousins are acceptable with proof of relationship to you and Confederate Service)

Legacy Memberships require the submission in duplicate of genealogy and proof of ancestor's satisfactory service in addition to the sponsor's name and MOS&B member number.

Yours in the Bonds of the Old South

Randy Kerlin
Genealogist General MOS&B

21 October 2009

TEL. (352) 694-3346 * CELL (352) 362-1708 * E-MAIL COMMANDER@MOSBFL.ORG
WWW.MOSBFL.ORG WWW.MOSBIHQ.ORG



Military Order of Stars and Bars

Application For Membership

Society Number

Date Admitted

(IHQ Office Use Only)

Applicant's Name: _____
(first) (mid) (last) (suf)

Address: _____
City State Zip

() () ()
Work Phone Home Phone Cell Phone Email Address

Ancestor's Name Rank Unit

Relation to Ancestor Dates of Service

Status at the end of the war (Paroled, KIA, Resigned, Died, etc) Primary source of verification: Microfilm, Broadfoot, etc.

If joining under relative's MOSB number
Relative's Name Relationship MOSB Number

I declare upon my honor and upon that of my Confederate Ancestor, that the above information, and information provided by me for membership, is true and correct to the best of my knowledge and belief. I shall, if admitted to membership, support the Constitution and Bylaws of the Military Order of Stars and Bars, and faithfully discharge any duties to which I may be called upon to execute as a member or officer.

Applicant's printed name Recommended by: _____
Printed name of MOSB member

Applicant's Signature Recommended by: _____
Signature of MOSB member

Date (day-month in letters-year) Recommending Member's Printed Name Title

Chapter Name & Number Society

Chapter Level Review
(Review by Chapter to which application is made):

Signature of Reviewing Chapter Officer

Date (day-month in letters-year) Reviewing Chapter Officer's Printed Name Title

Chapter Name & Number Society

Society Level Review:

Signature of Society Genealogist or Reviewing Society Officer

Date (day-month in letters-year) Society Genealogist or Reviewing Society Officer's Printed Name Title Society

Genealogist General Review:

Verification of Ancestor: Ancestor found in Broadfoot Index Ancestor Proven by Alternate Index or Documentation

Review Date (day-month in letters-year) Approval Date (day-month in letters-year) Signature of Genealogist General

Form revised September 2006

Military Order of Stars and Bars Lineage Documentation Form

This document is to be permanently kept with the application.

1 I am _____
Applicant's Name Born Where

My wife is _____
Applicant's Wife's Maiden Name Born Where

Married _____
Date Where Died Where

Proof: _____

2 I am the son of _____
Father's Name Born Where

Died Where

_____ Mother's Maiden Name Born Where

Married _____
Date Where Died Where

Proof: _____

3 My _____ was the _____ of
(Father/Mother) son / daughter / brother / sister

_____ Name Born Where

Died Where

_____ Wife's Maiden Name Born Where

Married _____
Date Where Died Where

Proof: _____

Military Order of Stars and Bars Lineage Documentation Form

This document is to be permanently kept with the application.

4 My Ancestor _____ was the _____ of
son / daughter / brother / sister

_____	_____	_____
Name	Born	Where
_____	_____	_____
	Died	Where
_____	_____	_____
Wife's Maiden Name	Born	Where
_____	_____	_____
Married Date Where	Died	Where
Proof:	_____	

5 My Ancestor _____ was the _____ of
son / daughter / brother / sister

_____	_____	_____
Name	Born	Where
_____	_____	_____
	Died	Where
_____	_____	_____
Wife's Maiden Name	Born	Where
_____	_____	_____
Married Date Where	Died	Where
Proof:	_____	

6 My Ancestor _____ was the _____ of
son / daughter / brother / sister

_____	_____	_____
Name	Born	Where
_____	_____	_____
	Died	Where
_____	_____	_____
Wife's Maiden Name	Born	Where
_____	_____	_____
Married Date Where	Died	Where
Proof:	_____	

Military Order of Stars and Bars Lineage Documentation Form

This document is to be permanently kept with the application.

7 My Ancestor _____ was the _____ of
son / daughter / brother / sister

Name	Born	Where
	Died	Where
Wife's Maiden Name	Born	Where
Date	Where	Died
Where	Died	Where

Married

Proof: _____

8 My Ancestor _____ was the _____ of
son / daughter / brother / sister

Name	Born	Where
	Died	Where
Wife's Maiden Name	Born	Where
Date	Where	Died
Where	Died	Where

Married

Proof: _____

9 My Ancestor _____ was the _____ of
son / daughter / brother / sister

Name	Born	Where
	Died	Where
Wife's Maiden Name	Born	Where
Date	Where	Died
Where	Died	Where

Married

Proof: _____
