



Joining the Military Order of the Stars and Bars

Membership in the **Military Order of the Stars and Bars** (MOSB) will be one of the your most meaningful experiences. There must be a qualifying ancestor to join our order. A qualifying ancestor will have been an Officer, a Surgeon, a Chaplain in the Confederate Army or Navy, or an elected or appointed official in the Confederate States of America 1861-1865. Proof of honorable service is a must.

The preferred method to join the MOSB is through a chapter in your area. To determine the closest chapter, contact our International Headquarters: **headquarters@militaryorderofthestarsandbars.org**.

Headquarters can guide you through the process and see that you are placed in contact with a convenient chapter. If no local chapter is available, you will join the National At-Large Chapter.

The first step will be to download and save the auto-fill form application to your hard drive. Then open it up and begin typing your answers. **Handwritten applications are not permissible.** The application is an auto-fill form, so you can work on it until you are ready to print, sign and mail it in. **Also, legal-size or double-sided sheets will not be accepted. All applications shall one-sided and be 8.5" by 11". Incomplete applications will not be processed.**

For direct relationship begin by filling out the family information sheet, starting with yourself and continue through each generation back to your Qualifying Confederate Ancestor.

For a collateral relationship type the application from you to the Most Common Recent Ancestor (MCRA) which is typically a distant Grandparent. Mark the ancestor MCRA. This is very important.

If necessary, use a second application beginning with the MCRA and list to the Qualifying Confederate Ancestor. Make sure to label the applications 1 & 2 or A and B.

If you can link your family tree to our Collateral Database, then begin the application from you and list each generation to the ancestor as stated above.

Fill in all known dates and locations for each generation, include maiden names.

Proofs: Always begin with a copy of your birth certificate and your parents birth and or death certificates. Always use primary documents including birth-marriage or death certificates-census records, family bible entries, published genealogical books on your family tree, and military records to the extent that is practical. **Use one primary proof per generation.**

It is the 21st century and primary documents can be found back to the turn of the 20th century easily. Applicants for membership in a local chapter will be assisted by local resources and members. Those applying for National-At-Large membership will be assisted by the Genealogist General.

Proof of acceptable Confederate service is mandatory. **Incomplete applications will not be processed.**

Collateral relationships must demonstrate a precise degree of relation "EG (5C5R) or Great Nephew.

Each application from a local chapter must be signed by the applicant and also by the individual recommending membership, a local chapter officer, and the society genealogist or society commander.

If applying for National At-Large Chapter, the application and all supporting documents along with the joining fee payable to the MOSB must be mailed to: **Military Order of Stars and Bars, P.O. Box 18901, Raleigh, NC 27619-8901**

Legacy applications must be filled out completely and signed. Primary proofs must be provided from the applicant to the hero that the application is based on. If further proofs or information is required, the Genealogist General will contact the applicant for them.

Members submitting supplemental applications should download the auto fill application form, fill it out and attach all proofs. Because you are already a member you do not need any other signature on the form but your own. All generations need a proof, since the application goes into a separate file.

Please only send one check for each application. One check for multiple applications is not permissible.



Military Order of the Stars and Bars

Application for Membership

For MOS&B IHQ Use: National Society #: _____ Name: _____ (last)(first)(middle)(suffix) Date Received: _____ Date Approved: _____

Applicant Name: _____
 (Prefix) (Last) (First) (Middle) (Suffix)

Check One:

Local Chapter: State: _____ Chapter Number or Name: _____

National At-Large Chapter

Check One: Note: These dues do not include any state society or local chapter dues that may apply.

Annual Member - \$60

Legacy Member - \$50

(Joining on the record of a direct relationship with an existing member; e.g., father, grandfather, and brother)

Member Number & Name _____

Supplemental Confederate Relation - \$20 - MOSB Membership Number: _____
 (Honoring an additional relation)

Life Member - See Schedule Below

Life Membership Schedule (check or fill in all appropriate boxes below based on age and

Payment plan: One Payment in Full or Installment Plan

Under Age 20	\$1,000
Age 20 - 29	\$900
Age 30 - 39	\$800
Age 40 - 49	\$700
Age 50 - 59	\$600
Age 60 - 69	\$500
Age 70 +	\$400

Installment Plan (paid in full within 12 months)

Due by \$ _____
 Due by \$ _____
 Due by \$ _____
 Due by \$ _____

Life Memberships

NOTE: The life membership fee is subject to change within a sixty (60) days posted notice in *Officer's Call* newsletter or by the General Executive Council notice. Any changes in cost will not affect those who are already Life Members. National life memberships do not extend to state society and local chapter dues. Your state society may also have a society lifetime membership - check with your Society Adjutant, if interested.

Military Order of the Stars and Bars - Application for Membership - Page 2

Applicant

Full Name: _____
Mailing Address: _____
Mailing Address 2: _____
City: _____
State: _____
Country: _____
Zip: _____
Home Phone: _____
Work Phone: _____
Cell Phone: _____
E-mail: _____

Confederate Relation

Rank/Title: _____
First Name: _____
Middle Name: _____
Last Name: _____
Suffix: _____
Unit: _____
State: _____
Dates of Service: _____
From (MM/DD/YY) To (MM/DD/YY)

Status at end of War: _____
(Paroled, KIA, MIA, Resigned, Dead)

Degree of Relatedness to Confederate: _____
(Example: 2GGSON; 2 GGNEPHEW; 5C5R)

NOTE: Applications establishing a blood relationship through a statement of cousin relatedness need to provide the specific degree of relatedness, e.g. 5C5R. In those situations the lineage must be stated to the Most Recent Common Ancestor (MRCA) from the applicant and then also traced from the Confederate relation backward to the MRCA. In those situations the lineage documentation must be adapted to reflect both lineages. For Collateral relationship to one of the following: President Davis or Generals Lee, Jackson, Forrest & Stuart, it is necessary to show your blood relationship to one of the qualifying ancestors shown in the **MOS&B Collaterals** database.

Lineage Documentation - **PROVIDE COPIES OF ALL CITED PROOFS:** For Collateral Relationships provide a duplicate set of lineage papers from the qualifying relation back to the MRCA stated at the ending generation of the first set of lineage papers.

Generation No.1

My Full Name _____
My Date of Birth _____
My Place of Birth (city, county, state) _____
My Wife's Full Maiden Name _____
Our Marriage Date _____
Our Marriage Place _____
Proofs _____

Generation No. 2

My Father's Full Name _____
My Father's Date of Birth _____
My Father's Place of Birth _____
My Father's Date of Death _____
My Father's Place of Death _____
My Mother's Full Maiden Name _____
My Mother's Date of Birth _____
My Mother's Place of Birth _____
My Mother's Date of Death _____
My Mother's Place of Death _____
My Parent's Date of Marriage _____
My Parent's Place of Marriage _____
Proofs _____

Generation No. 3

Father's Full Name _____
Father's Date of Birth _____
Father's Place of Birth _____
Father's Date of Death _____
Father's Place of Death _____
Mother's Full Maiden Name _____
Mother's Date of Birth _____
Mother's Place of Birth _____
Mother's Date of Death _____
Mother's Place of Death _____
Their Date of Marriage _____
Their Place of Marriage _____
Proofs _____

Generation No. 4

Husband's Full Name _____
Husband's Date of Birth _____
Husband's Place of Birth _____
Husband's Date of Death _____
Husband's Place of Death _____
Wife's Full Maiden Name _____
Wife's Date of Birth _____
Wife's Place of Birth _____
Wife's Date of Death _____
Wife's Place of Death _____
Their Date of Marriage _____
Their Place of Marriage _____
Proofs _____

Generation No. 5

Husband's Full Name _____
Husband's Date of Birth _____
Husband's Place of Birth _____
Husband's Date of Death _____
Husband's Place of Death _____
Wife's Full Maiden Name _____
Wife's Date of Birth _____
Wife's Place of Birth _____
Wife's Date of Death _____
Wife's Place of Death _____
Their Date of Marriage _____
Their Place of Marriage _____
Proofs _____

Generation No. 6

Husband's Full Name _____
Husband's Date of Birth _____
Husband's Place of Birth _____
Husband's Date of Death _____
Husband's Place of Death _____
Wife's Full Maiden Name _____
Wife's Date of Birth _____
Wife's Place of Birth _____
Wife's Date of Death _____
Wife's Place of Death _____
Their Date of Marriage _____
Their Place of Marriage _____
Proofs _____

Generation No. 7

Husband's Full Name _____
Husband's Date of Birth _____
Husband's Place of Birth _____
Husband's Date of Death _____
Husband's Place of Death _____
Wife's Full Maiden Name _____
Wife's Date of Birth _____
Wife's Place of Birth _____
Wife's Date of Death _____
Wife's Place of Death _____
Their Date of Marriage _____
Their Place of Marriage _____
Proofs _____

Generation No. 8

Husband's Full Name _____
Husband's Date of Birth _____
Husband's Place of Birth _____
Husband's Date of Death _____
Husband's Place of Death _____
Wife's Full Maiden Name _____
Wife's Date of Birth _____
Wife's Place of Birth _____
Wife's Date of Death _____
Wife's Place of Death _____
Their Date of Marriage _____
Their Place of Marriage _____
Proofs _____

Generation No. 9

Husband's Full Name _____
Husband's Date of Birth _____
Husband's Place of Birth _____
Husband's Date of Death _____
Husband's Place of Death _____
Wife's Full Maiden Name _____
Wife's Date of Birth _____
Wife's Place of Birth _____
Wife's Date of Death _____
Wife's Place of Death _____
Their Date of Marriage _____
Their Place of Marriage _____
Proofs _____

Military Order of the Stars and Bars - Application for Membership - Page 7

Declaration

I declare upon my honor and upon that of my Confederate relation that the above 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 the 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 _____
Applicant's signature _____
Date of application _____

Required approval information for local chapter applications

Recommending member's printed name _____
Chapter _____ Mbr. Number _____
Society _____ Date _____
Signature _____

Reviewing chapter officer's/genealogist printed name _____
Title _____
Chapter _____ Mbr. Number _____
Society _____ Date _____
Signature _____

Reviewing Society Genealogist or Commander

Officer's Name _____
Chapter _____ Mbr. Number _____
Society _____ Date _____
Signature _____

The IHQ and/or Genealogist General will contact the applicant directly regarding questions with the application unless the applicant designates a representative for the Genealogist General to communicate with by providing the representative's name and e-mail below.

Contact name: _____ E-mail: _____

Military Order of the Stars and Bars - Application for Membership - Page 8

For MOSB Genealogist

Reviewing Genealogist General's Printed Name _____

Signature _____ Date _____

Notification Information

New Member Package should be mailed to:

Name _____

Address _____

City _____ State _____

Country _____ Zip Code _____

Upon IHQ approval of application, please notify the following (email address must be listed below):

Chapter Adjutant: _____

Chapter Commander: _____

State Society Adjutant: _____

State Society Commander: _____

State Society Genealogist: _____

Other: _____

Other: _____

How did you hear about the Military Order of the Stars and Bars?

Magazine advertisement (please provide magazine's name and issue date): _____

From existing member (please provide member's name): _____

From another heritage/military society (please provide Society's name): _____

From other source (please describe): _____

As a military heritage group, we would like to know if you are a veteran and some facts about your service.

If needed, please attached additional information to this application.

Branch of service: _____

Time period(s) served (year enlisted: _____ Year separated/retired: _____)

Conflict(s) served in: _____ Combat zone: _____

Highest rank: _____ Currently serving? ____ Yes ____ No

Combat awards (please list on the next page)

Military Order of the Stars and Bars - Application for Membership - Page 9

List your Military Service/Combat Awards

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____
11. _____
12. _____
13. _____
14. _____
15. _____
16. _____
17. _____
18. _____
19. _____
20. _____

**Submit your completed application including legible copies of all supporting documentation
along with check (made payable to the MOSB) to the MOSB IHQ.**