



PETTER JA ELISABET HÄLLSTRÖMIN  
SUKUSEURA R.Y.

ILMAJOKI

## JÄSENTIETO- / MUUTOSLOMAKE

**BY FILLING OUT THIS FORM YOU CAN BECOME A MEMBER OF THE FAMILY ASSOCIATION  
OR MAKE NECESSARY ALTERATIONS (i.e. ADDRESS or NAME ALTERATIONS)**

Member's last name:	Previous last name/names:
Full name, underline first name:	
Place and time of birth:	Place and time of death:
Titel and/or profession:	
Responsible positions:	
Hobbies:	

### PARENTS OF MEMBER

Father's full name:	Mother's full name (also maiden name/previous last name/names):
Place and time of birth:	Place and time of birth:
Place and time of death:	Place and time of death:
Titel/Profession:	Titel/Profession:
Time and place of wedding:	

**SPOUSE OF MEMBER**

Full name:	Surname (also maiden name/previous last name/names):
Place and time of birth:	Place and time of death:
Time and place of wedding:	Titel/Profession:

**PARENTS OF SPOUSE**

Father's name:	Titel/Profession:	Number in family register:
Mother's name:	Titel/Profession:	Number in family register:

PLEASE, GIVE THE SAME INFORMATION FOR OTHER PREVIOUS MARRIAGES

**CHILDREN OF MEMBER**

Full names	Place and time of birth:	Place and time of death:
Date _____ 20____	I belong to the following lineage:	
Signature _____	Helena Westman _____ nbr. in family reg.	
Address: _____ _____ _____	Elisabet Latva-Jussila _____ nbr. in family reg.	
	Maria Hyövälti _____ nbr. in family reg.	
	Carl Hällström _____ nbr. in family reg.	
	Katariina Jaskari _____ nbr. in family reg.	
	Do not know _____	

RETURN THE FORM TO: RIITTA VAINIONPÄÄ, HÄMEENLINNANKATU 6 C 21, 65350 VAASA, FINLAND