

## GENEALOGY RESEARCH REQUEST FORM

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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

Person or family to be researched: \_\_\_\_\_

Area where research subject lived: \_\_\_\_\_

Time period in which they lived: \_\_\_\_\_

Facts already known such as parents, spouse, children, birth or death date, place of burial or religious affiliation which will help narrow the search and prevent providing already known information.\*

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What information do you hope to find? \_\_\_\_\_

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### RESEARCH FEES

**\*Cost is \$10.00 for the first hour which is non refundable, even if no information is found.**

\*Additional research is \$10.00/hr.

\*Reproduction of photos, if available, in any format, would incur an extra fee.

**Please make checks payable to:**

Chestnut Ridge Historical Society, Inc.

**Mailing address:**

Chestnut Ridge Historical Society Inc.

1698 State Route 711

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Stahlstown, PA 15687