



INQUIRY FORM: Historical/Genealogical Information

Please complete in full and return with your request to
Suzette Davidson, Georgetown Public Library
suzette.davidson@georgetown.org

Your Name _____ Date _____

Address _____

Email _____

Phone _____

What is your question? Please be specific, i.e. what information do you hope to find here?

Resources Already Consulted (Libraries, historical societies, census records, etc.). This helps to eliminate duplication:

If your question is about a particular ancestor or individual, complete the following section. Provide as many details as possible, even if the information is only approximate.

Last Name:

First Name(s):

Religion:

Father's name:

Mother's name:

Date of birth:

Place of birth:

Date of marriage:

Place of marriage:

Spouse's name:

Date of death:

Place of death:

Date of burial:

Place of burial:

Other pertinent details: children, siblings, occupation, organization memberships, etc.

Feel free to continue on the reverse side of this form

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