

MANNING WALLAMBA FAMILY HISTORY SOCIETY INC. ABN: 50 373 809 536 / RESEARCH REQUEST FORM

Provide as much data as possible and complete a separate form for each research name. If you require physical documents, please provide a Stamped, Self-Addressed Envelope, Initial Research Enquiry is \$20 including limited photocopying to the value of \$5

Additional Research \$10 per hour. Extra microfilm copying \$1 per page

YOUR DETAILS:

Mr/Mrs/Miss/Ms: SURNAME:		GIVEN NAMES:				
ADDRESS:		POST CODE:				
PHONE:	MOBILE:	EMAIL:				
AMOUNT ENCLOSED OR EFT: \$		SIGNATURE:				
I agree to Manning Wallamba FHS publishing my details in their journal "Fig Tree" or releasing them						
to other people who are researching the same family. SIGNATURE:						

SUBMISSION DETAILS:

- SEND FORM BY MAIL TO: Research Officer, MWFHS Inc, Ground Floor, 242 Victoria Street, TAREE NSW 2430
- SCAN AND EMAIL FORM TO: secretary@manningwallambafhs.com.au with all details
- DEPOSIT ANY MONIES EFT: Regional Aust Bank / BSB 932000 / Account 500029297
- OR SEND A CHEQUE FOR THE AMOUNT TO: Research Officers, MWFHS, Ground Floor,
 242 Victoria Street, TAREE 2430 (Cheque made out to Manning Wallamba FHS)

KNOWN INFORMATION:		When: Where:		
PERSON'S NAME:		Born:		
(Father's Name):		Born:		
(Mother's Name):		Born:		
Port of Arrival:	Date:	Ship:		
Died:		Buried:		
Occupation:	Marriage:	When: Where:		
SPOUSE'S NAME:		Born:		
(Father's Name):		Born:		
(Mother's Name):		Born:		
Port of Arrival:	Date:	Ship:		
Died:		Buried:		
CHILDREN:		When Where:		
1.		Born:		
2.		Born:		
3.		Born:		
4.		Born:		
5.		Born:		
6.	·	Born:		
7.		Born:		
8.	·	Born:		
Additional Children		Please write on the back of this page		

INFORMATION REQUIRED: (Continue on back of page if more space required)