



# HALDIMAND MUSEUMS

## Genealogy Research Request

- Haldimand County Museum & Archives, 8 Echo Street, Cayuga, Ontario N0A-1E0•
- Edinburgh Square Heritage and Cultural Centre, 80 Caithness Street, Caledonia, Ontario N3W-2G6•
- Wilson MacDonald Memorial School Museum, 3513 Rainham Road, Selkirk, Ontario N0A-1P0•

**A non-refundable payment of \$44.00 is required in advance for a minimum of two hours of research. This fee includes photocopying and mailing of information (within reason).**

If no information can be collected regarding your request you will be notified.

If the enquiry proves to be extensive, you will be contacted to confirm the extra hours to continue researching your request. Additional research may be requested at a rate of \$22.00 per hour.

Please allow 4 - 6 weeks for a response.

Cheques are made payable to:

**Haldimand Museums**

**P.O. Box 400, Cayuga, ON N0A-1E0**

**Please Note: This contract must be signed and returned with payment before your request is processed.**

# FORMAL RESEARCH REQUEST

(OFFICE USE - DATE OF ARRIVAL: \_\_\_\_\_)

(PLEASE PRINT)

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

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

Family Name(s) to be researched: \_\_\_\_\_

In what area/Township did they reside: \_\_\_\_\_

What year did they reside here: \_\_\_\_\_

Ancestor: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Place of Birth: \_\_\_\_\_

Date of Death: \_\_\_\_\_

Place of Death: \_\_\_\_\_

Date Married: \_\_\_\_\_

Place of Marriage: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Place of Birth: \_\_\_\_\_

Date of Death: \_\_\_\_\_

Place of Death: \_\_\_\_\_

Children:

1. _____	Born: _____	Died: _____
2. _____	Born: _____	Died: _____
3. _____	Born: _____	Died: _____
4. _____	Born: _____	Died: _____
5. _____	Born: _____	Died: _____
6. _____	Born: _____	Died: _____
7. _____	Born: _____	Died: _____
8. _____	Born: _____	Died: _____
9. _____	Born: _____	Died: _____

**I AM REQUESTING \_\_\_\_\_ HOURS OF RESEARCH BY THE HALDIMAND MUSEUMS.**

PLEASE CHECK (✓) ONE OF THE FOLLOWING:

I would like to be notified of the potential extra hours to research my request.

Research only the number of hours requested above.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Telephone