

CENTRAL COAST FAMILY HISTORY SOCIETY Inc.

ABN 30-269-707-398

P.O Box 4090 East Gosford NSW 2250

Email: admin@centralcoastfhs.org.auWeb: www.centralcoastfhs.org.au

RESEARCH REQUEST FORM
CONTACT DETAILS

NAME:	
ADDRESS:	
POSTCODE:	
PHONE:	
EMAIL:	
THE INTIAL RESEARCH FEE IS TO BE PAID WITH THE REQUEST & IS NON-REFUNDABLE.	
INITIAL RESEARCH FEE: \$20	
<input type="checkbox"/> DIRECT DEPOSIT: Central Coast Family History Society Inc: Bendigo Bank- 101 Victoria St.- East Gosford NSW	OFFICE USE ONLY
BSB: 633000 Account No: 175073667 (Please use your name as REFERENCE)	DATE RECEIVED: DATED COMPLETED:
<input type="checkbox"/> EFTPOS <input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD <input type="checkbox"/> CHEQUE	AMOUNT PAID: RESEARCHER:
Please mark with an X the appropriate method of payment	

ADDITIONAL COSTS:

- 30 cents per page for black & white photocopying- colour extra depending on size
- Postage at the current rate
- Before proceeding with the research you will be contacted re the expected total cost
- You will be advised if no information was found

To help get the most from your research request and to assist in the location of information- please fill out the details below with as much information as you can or from sources you have checked yourself.

IMPORTANT INFORMATION REQUIRED:

FULL NAME OF PERSON FOR RESEARCH:		
BIRTH DATE:	LOCATION:	SOURCE:
MARRIAGE DATE:	LOCATION:	SOURCE:
DEATH DATE:	LOCATION:	SOURCE:
OCCUPATION:		
NAME OF PARENTS OF PERSON BEING RESEARCHED		
FATHER:	MOTHER:	
SPOUSE:		
CHILDREN OF THIS MARRIAGE -NAMES:		
ANY SPECIAL REQUEST:		
ANY OTHER INFORMATION YOU CAN PROVIDE:		