

**Research Request Form
IGSW Members Only**

**Irish Emigration Library
2133 West Wisconsin Avenue
Milwaukee, Wisconsin 53233-1910**

Name: _____

Address: (Including ZIP) _____

Phone (With Area Code) _____ e-mail _____

Research Subject _____ Sex _____

(One only – if person both First and Surname)

If known: Co. In Ireland _____ Parish _____

Townland _____ Birth _____ Death _____

Port of arrival and approx. date of emigration _____

State Question/Problem: _____

If you have a Family Group Sheet that includes the search subject please send it along with any other information that you feel will assist the researcher.

Please check type of search requested: (See reverse side for explanation of a search)

Search 1 _____ Search 2 _____ Search 3 _____ Search 4 _____

Search 5 _____ Search 6 _____ Search 7 _____ CDs _____

Cost for Members of IGSW \$4.00 per search

Enclose a check for number of searches _____ X \$4.00 = _____

Send a check payable to the *Irish Emigration Library* at the above address. Note: Fee will cover copy and mail costs. When possible our reply will be made by e-mail. Every effort will be made to fill your request. However, fees are not refundable.

For Staff Use Only -- Date Received: _____ Request No. _____

Name of Researcher: _____

Date Started _____ Date Completed _____