



LOOK UP APPLICATION FORM

REF. _____
(Office Use Only)

APPLICANT DETAILS

Name: _____ Member No: _____

Address: _____ Date Rec.: _____

E-mail Address _____

Telephone Number _____ Date: _____

1. Details of Person to Look up

Surname of Family: _____ Given Names _____

Date & Place of Birth _____ Date & Place of Marriage _____

Date & Place of Death _____ Occupation _____

Spouse Surname _____ Spouse First Name _____

Father's Name _____ Mother's Name _____

2. Details of Required Look Up

FILM /FICHE TITLE _____

FILM/FICHE FRAME NO. _____

BOOK TITLE _____ BOOK PAGE NO _____

3. Application Details

- PLEASE FILL IN THE PRECISE DETAILS YOU ARE SEEKING
- APPLICATIONS MUST BE ON THIS FORM AND MUST BE ACCOMPANIED BY THE MINIMUM FEE AS LISTED BELOW:
 - Look Up Fees: Members \$12 per item/ Non Members \$20 per item
 - Payments can be made by cheque in \$AUD payable to AIGS Inc.
 - For security reasons we are unable to accept online BPay or Credit card payments
- Look ups are limited to those resources available in the FHC Library
- Please forward your requests to the Research Coordinator
- Enquiries can be directed by e-mail to research@familyhistoryconnections.org.au or by mail to PO Box 339, Blackburn, 3130

4. Credit Card Details

Credit Card Authorisation	Card Type (please circle) VISA/MASTERCARD
Name on card	Amount \$AUD.....
Card Number.....	Valid to.....
CCV Number.....	Signature.....