

Family Group Record

Family group record number _____. Page _____ of _____.

Birth date	Birthplace	
Christening date	Christening place	
Marriage date	Marriage place	
Death date	Death place	
Burial date	Burial place	
		<input type="checkbox"/> Deceased
		<input type="checkbox"/> Deceased
Other parents and other spouses		

Birth date	Birthplace	
Christening date	Christening place	
Death date	Death place	
Burial date	Burial place	
		<input type="checkbox"/> Deceased
		<input type="checkbox"/> Deceased
Other parents and other spouses		

Children

Name			<input type="checkbox"/> Male <input type="checkbox"/> Female
Birth date	Birthplace		
Christening date	Christening place		
Marriage date	Marriage place	Spouse	
Death date	Death place		
Other parents and other spouses			

Name			<input type="checkbox"/> Male <input type="checkbox"/> Female
Birth date	Birthplace		
Christening date	Christening place		
Marriage date	Marriage place	Spouse	
Death date	Death place		
Other parents and other spouses			

Family Group Record—continued

Children—continued			
Name			<input type="checkbox"/> Male <input type="checkbox"/> Female
Birth date	Birthplace		
Christening date	Christening place		
Marriage date	Marriage place	Spouse	
Death date	Death place		
Other parents and other spouses			
Name			<input type="checkbox"/> Male <input type="checkbox"/> Female
Birth date	Birthplace		
Christening date	Christening place		
Marriage date	Marriage place	Spouse	
Death date	Death place		
Other parents and other spouses			
Name			<input type="checkbox"/> Male <input type="checkbox"/> Female
Birth date	Birthplace		
Christening date	Christening place		
Marriage date	Marriage place	Spouse	
Death date	Death place		
Other parents and other spouses			
Name			<input type="checkbox"/> Male <input type="checkbox"/> Female
Birth date	Birthplace		
Christening date	Christening place		
Marriage date	Marriage place	Spouse	
Death date	Death place		
Other parents and other spouses			
Name			<input type="checkbox"/> Male <input type="checkbox"/> Female
Birth date	Birthplace		
Christening date	Christening place		
Marriage date	Marriage place	Spouse	
Death date	Death place		
Other parents and other spouses			

Family Group Record—continued

Children—continued			
Name			<input type="checkbox"/> Male <input type="checkbox"/> Female
Birth date	Birthplace		
Christening date	Christening place		
Marriage date	Marriage place	Spouse	
Death date	Death place		
Other parents and other spouses			
Name			<input type="checkbox"/> Male <input type="checkbox"/> Female
Birth date	Birthplace		
Christening date	Christening place		
Marriage date	Marriage place	Spouse	
Death date	Death place		
Other parents and other spouses			
Name			<input type="checkbox"/> Male <input type="checkbox"/> Female
Birth date	Birthplace		
Christening date	Christening place		
Marriage date	Marriage place	Spouse	
Death date	Death place		
Other parents and other spouses			
Name			<input type="checkbox"/> Male <input type="checkbox"/> Female
Birth date	Birthplace		
Christening date	Christening place		
Marriage date	Marriage place	Spouse	
Death date	Death place		
Other parents and other spouses			
Name			<input type="checkbox"/> Male <input type="checkbox"/> Female
Birth date	Birthplace		
Christening date	Christening place		
Marriage date	Marriage place	Spouse	
Death date	Death place		
Other parents and other spouses			

Family Group Record—continued

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Sources and Notes Attach additional sheets as necessary.

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Contributor's Name and Information

Contributor's name	Birth date	Phone (with area code)
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Address

Email

Date prepared	Helper access number
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Instructions

- Write all names as full, main, legal names in the order they are spoken. Write a woman's maiden name (birth name), not her married name.
 - Write all dates as day, month, and year, such as 4 Oct 1996.
 - Write all places in order of smallest to largest political jurisdiction, separated by commas, such as Tryon, Polk, North Carolina, USA, or Wymondham, Norfolk, England.
 - List children in order of birth, whether living or deceased. Number each child (3, 4, 5, and so on).
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