••••• FILL IN and Mail In with Registration or Bring to Reunion Check-In •••••

FAMILY DATA SHEET

This form will be used to create genealogy charts for each branch for the use at next reunion. We appreciate if you are able to fill out as much info as you have. Thank you!

YOUR NAME/PHONE/EMAIL _____

Joseph • Sebastian			
DESCENDANT (ful	l name):		
Event	Date Place of event (City, County, State, Country)		
Birth			
Marriage			
Death	>		
Prior Spousc(s):			
Father's Name (DOB):			Mother's maiden Name (DOB):
SPOUSE (if applica	ble):		
Event	Date Place of event (City, County, State, Country)		
Birth			7
Marriage			
Death	y		
Prior Spousc(s):			
Father's Name (DOB):			Mother's maiden Name (DOB):
CHILDREN (of this	marriage):	[fill out a seperat	te form for children of previous marriagel
Given name	Event	Date	Place of event (City, County, State, Country)
	Birth		
	Marriage	٠.	
	Death		
	Spouse's name		8
	Birth		
	Marriage		
	Death		
	Spouse's name		
	Birth		
	Marriage		
	Death		
	Spouse's name		
	Birth		
	Marriage		
	Death		
	Spouse's name		