

Waldensian Heritage Museum Genealogy Form

P.O. Box 111/208 Rodoret Street South Valdese, NC 28690

waldensianheritagemuseum.com

828-874-1111

Please return by mail to the P.O. Box listed above, or by email to director@waldensianheritagemuseum.com

Submitted By (Please Print): _____

Email/Phone: _____

Full Maternal Waldensian Name(s): _____ DOB/DOD: _____

Full Paternal Waldensian Name(s): _____ DOB/DOD: _____

Mother's Full Name: _____ DOB/DOD: _____

Check Box if Waldensian

Father's Full Name: _____ DOB/DOD: _____

Check Box if Waldensian

HUSBAND:

Check Box if Waldensian

Name: _____

Birth Date: _____ Birthplace: _____

Marriage Date: _____ Marriage Place: _____

Death Date: _____ Place: _____

Burial Place: _____

Father: _____ Birth Date: _____ Death Date: _____

Mother: _____ Birth Date: _____ Death Date: _____

Previous Spouses Full Name (if applicable): _____

WIFE:

Check Box if Waldensian

Name: _____

Birth Date: _____ Birthplace: _____

Death Date: _____ Place: _____

Burial Place: _____

Father: _____ Birth Date: _____ Death Date: _____

Mother: _____ Birth Date: _____ Death Date: _____

Previous Spouses Full Name (if applicable): _____

CHILDREN:

Name: _____

Birth Date: _____ Birthplace: _____

Spouse: _____

Marriage Date: _____ Marriage Place: _____

Death Date: _____ Place: _____

Burial Place: _____

Children (List Names, Birthdates, Birthplaces, Death Dates): _____

Name: _____

Birth Date: _____ Birthplace: _____

Spouse: _____

Marriage Date: _____ Marriage Place: _____

Death Date: _____ Place: _____

Burial Place: _____

Children (List Names, Birthdates, Birthplaces, Death Dates): _____

Name: _____

Birth Date: _____ Birthplace: _____

Spouse: _____

Marriage Date: _____ Marriage Place: _____

Death Date: _____ Place: _____

Burial Place: _____

Children (List Names, Birthdates, Birthplaces, Death Dates): _____

Make copies if necessary.