

Ancestors Form

Please use this form when ordering your Ancestors mug if you are not submitting your data in digital format. If you are using email or sending us a disk in the post then you may discard this form.

You may photocopy this form or print further copies by going to www.my-history.co.uk/Ancestors_Form.pdf

Child's Details

First Name/s: _____

Surname: _____

Date of Birth: ____/____/____

Location: _____

Please supply a photograph either on disc or an original for us to scan (see the mug order form).

Original will be returned by post with your proof.

Please return this form along with a mug order form to:

My History
Unit 53 The Brampton Centre,
Brampton Road, Wath-upon-Deerne,
Rotherham, S63 6BB
Tel: 01709 876633

Parents

Father

First Name/s: _____

Surname: _____

Date of Birth: ____/____/____

Location: _____

Date of Death: ____/____/____

Location: _____

Mother

First Name/s: _____

Maiden name: _____

Date of Birth: ____/____/____

Location: _____

Date of Death: ____/____/____

Location: _____

Marriage Details

Date: ____/____/____

Location: _____

Grandparents

If you require mugs for other children with the same parents and grandparents, then you do not need to fill in the 2nd and 3rd columns on additional sheets

Father's parents

Grandfather

First Name/s: _____

Surname: _____

Date of Birth: ____/____/____

Location: _____

Date of Death: ____/____/____

Location: _____

Marriage Date: ____/____/____

Mother's parents

Grandfather

First Name/s: _____

Surname: _____

Date of Birth: ____/____/____

Location: _____

Date of Death: ____/____/____

Location: _____

Marriage Date: ____/____/____

Grandmother

First Name/s: _____

Maiden name: _____

Date of Birth: ____/____/____

Location: _____

Date of Death: ____/____/____

Location: _____

Location: _____

Grandmother

First Name/s: _____

Maiden name: _____

Date of Birth: ____/____/____

Location: _____

Date of Death: ____/____/____

Location: _____

Location: _____
