

# Trinity Reformed Church, Ridgewood

## Copy Request Form

(Please Print)

### Requestor Information:

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Zip Code \_\_\_\_\_ Country \_\_\_\_\_

Phone \_\_\_\_\_ **E-Mail** \_\_\_\_\_

**A copy of the requested records will be sent via E-Mail only.**

**Are you a GGG Member (Yes/No)?** \_\_\_\_

Copy Fee: **\$3.00 for each record requested**

I am enclosing: \$ \_\_\_\_\_ for \_\_\_\_\_ record(s)

Please make your check payable to the German Genealogy Group and mail to:

**German Genealogy Group  
ATTN: Record Search  
PO BOX 1004  
Kings Park, New York 11754-1004**

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### Record Information:

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Type of Event (Baptism or Marriage): \_\_\_\_\_

Event Date: \_\_\_\_\_ Book # \_\_\_\_\_ Page# \_\_\_\_\_ Entry# \_\_\_\_\_

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