

LOTHIANS FAMILY HISTORY SOCIETY – B.M.D. TRANSCRIPTION REQUEST FORM

Please provide as much information as possible and complete one form per enquiry

Your name	<input type="text"/>	LFHS membership number	<input type="text"/>
Your address	<input type="text"/>		
Email address	<input type="text"/>		

Event (please tick only one) Birth or Marriage or Death (post 1855 only)

Exact date (if known) Day Month Year Or 5 years from

Parish or District name

GROS Codes (see instructions) G1 G2 G3 or G5 Frame

LDS Batch Number (see instructions)

Birth

Child's full name	<input type="text"/>
Father's full name	<input type="text"/>
Mother's first name and maiden surname	<input type="text"/>

Marriage

Bride's full name	<input type="text"/>
Groom's full name	<input type="text"/>
Bride's father's name	<input type="text"/>

(The following are for marriages after 1855 only)

Bride's mother's name	<input type="text"/>
Groom's father's name	<input type="text"/>
Groom's mother's name	<input type="text"/>

Death (only available after 1855)

Deceased's full name	<input type="text"/>
Maiden surname if married woman	<input type="text"/>
Spouse's name (use maiden name if wife)	<input type="text"/>
Deceased's age	<input type="text"/>
Deceased's father's name	<input type="text"/>
Deceased's mother's name	<input type="text"/>

Please provide any other relevant information on the back of this form and return the completed form with payment to: The Lothians Family History Society, Lasswade High School Centre, Eskdale Drive, Bonnyrigg, Midlothian, EH19 2LA, Scotland.