

Pennsylvania State Archives Researcher Registration Form

You need to complete this form only for your first visit. **Required fields** are marked with *. Thank you!

*Last: _____ *First: _____ MI: _____

*Street Address: _____ PA County _____

*City: _____ *St: _____ *Zip: _____ *Phone: (____) ____ - ____

*E-Mail: _____

Age Group: ____ <20 (A) ____ 20-29 (B) ____ 30-39 (C) ____ 40-49 (D) ____ 50-59 (E) ____ 60+ (F)

* May we share your contact information with the PA Heritage Foundation, the non-profit that supports our work? ____ Yes ____ No

How would you describe your profession or occupation?

____ Historian (A) ____ Educator (B) ____ Lawyer (D) ____ Professional Genealogist (H)
____ Writer (N) ____ Surveyor (O) ____ Government (F) ____ Historic Preservationist (G)
____ Librarian (L) ____ Family Historian (P) ____ Retired (I) ____ Other: _____ (J)

Student (C): ____ High School ____ Undergrad ____ Grad ____ PhD School: _____

Institutional/Organizational Affiliation: _____

How would you describe your research interest?

____ Genealogy (A) ____ History (B) ____ Legal (C) ____ Personal (H)
____ PHMC (D) ____ State (E) ____ Federal (G) ____ County/Municipal (F)
____ Hobby (I) ____ Education (J) ____ Business (K) ____ Media/Journalist
____ Other (L): _____

We can provide better service if we know something about your research topic:

Description of topic: _____

County/Geographic area of interest: _____

Surname(s) of interest: _____

How did you learn about the Pennsylvania State Archives?

____ Archives publication (A) ____ Other publication (B) ____ Citation/footnote (C)
____ Other Archives visitors (E) ____ PHMC speaker/program (F) ____ Mail/phone contact with Archives (D)
____ State Library (I) ____ Media publicity (G) ____ Local historical/genealogical society (J)
____ Website (K): _____ ____ Blog: _____ Other: _____

I have read the *Research Room Procedures* and agree to abide by them. I understand that violation of these procedures can result in the revocation of my research privileges.

Signature _____ Date _____