



Eddy Family Association, Inc.
Eddy Family Association Genealogical Form

PLEASE PRINT OR TYPE ALL INFORMATION. BE CLEAR AND ACCURATE
 AND PLEASE DOUBLE CHECK THE INFORMATION YOU ARE SUBMITTING.

CD GEDCOM FILES OR WORD FILES NOW ACCEPTED
 Please list all dates in the following format: DD/MM/YYYY

If the individual you are submitting has appeared in any of the EFA Publications please List the following:

EFA PUBLICATION _____, PAGE # _____, Genealogical # _____

INDIVIDUAL YOU ARE SUBMITTING {FULL NAME, INCLUDING MAIDEN NAME IF APPLICABLE}

Birth Date _____ Place _____

Death Date _____ Place _____

Buried at _____ in _____

(Please complete a separate form for each marriage)

Complete Name of Spouse _____

Marriage Date _____ Place _____

Birth Date _____ Place _____

Death Date _____ Place _____

Buried at _____ in _____

Name Of Spouse's Parents {please include maiden name when possible}

Children By The Above Marriage or Relationship:

| Complete Name | Birth Date | Place | Death Date | Place |
|---------------|------------|-------|------------|-------|
| | | | | |
| | | | | |
| | | | | |

Career details or interesting facts

Eddy Ancestors:

| | Complete Name | Date of Death | Place of death | Genealogical # |
|--------------------------|---------------|---------------|----------------|----------------|
| Father or Mother | | | | |
| Grandfather/Mother | | | | |
| G-Grandfather/Mother | | | | |
| Gr-gr grandfather/Mother | | | | |

Name and address of person supplying this information and relationship to above individual:

Name: _____ Address: _____

Relationship: _____

Today's Date: _____ Email: _____

Please send form or genealogical information to:
Stephanie Eddy, 4374 Hwy 35 N., Cameron, ON, Canada K0M 1G0
Email: GENEALOGIST@EDDYFAMILYASSOCIATION.COM