

SEIDEMANN FAMILY GENEALOGY FORM

We want all members of the Seidemann Family recorded in our database with correct information. In an effort to achieve this, please complete and return this form, supplying information which applies to you that was not shared 16 years ago. If your grandparents, parents, children, and grandchildren are not on our mailing/email list please make copies of this sheet for them to fill out (or fill out for them). If you have been married before or had children with another person, please fill out a sheet for each of those relationships. PLEASE PRINT. Mail to: Seidemann Family, P. O. Box 184, Newburg, WI 53060-0184. Thank you!

Descendant's Name: _____
First Middle (Maiden Name) Last

Birth Date: _____ Day Month Year Death Date: _____ Day Month Year

Biological Mother: _____ First, Middle, Maiden, Last Name Adopted Mother: _____ First, Middle, Maiden, Last Name

Biological Father: _____ First, Middle, Last Name Adopted Father: _____ First, Middle, Last Name

Your Marriage Date: _____ Day Month Year

Spouse/Relationship's Name: _____ First Middle (Maiden Name) Last

Spouse/Relationship's Birth Date: _____ Day Month Year Death Date: _____ Day Month Year

Include all children living and deceased. Add more pages if needed.

1st Child Name: _____ First Middle (Maiden Name) Last

1st Child Birth date: _____ Day Month Year Death Date: _____ Day Month Year

Please check if: Biological Child _____ Adopted Child _____

2nd Child Name: _____ First Middle (Maiden Name) Last

2nd Child Birth date: _____ Day Month Year Death Date: _____ Day Month Year

Please check if: Biological Child _____ Adopted Child _____

3rd Child Name: _____ First Middle (Maiden Name) Last

3rd Child Birth date: _____ Day Month Year Death Date: _____ Day Month Year

Please check if: Biological Child _____ Adopted Child _____

The information below will be added to our contact list. We will not share it with others without your permission.

Your Mailing Address: _____ Email addresses (to save on postage) _____ Phone numbers: (if needed to contact you for info clarification) _____

