



FAMILY TREES PROJECT

AMENDMENT/ADDITION FORM



Mail Completed Form to: *Chung Wah Society (Museum) GPO Box 1801 Darwin NT 0810*
 Or: *Leave with Museum Attendant*

NOTIFICATION OF BIRTH/S

FAMILY GROUP*	Name	Date of Birth	Gender	Place of Birth
Father				
Mother				
New Child A				
New Child B				
Sibling 1				
Sibling 2				
Sibling 3				
Sibling 4				

NOTIFICATION OF DEATH/S

FAMILY GROUP*	Name	Date of Death	Place of Death	Place of Burial
Name of Deceased A				
Name of Deceased B				

NOTIFICATION OF MARRIAGE

FAMILY GROUP*	Name	Date of Marriage	Place of Marriage
Husband			
Wife (Maiden Name)			

GENERAL AMENDMENTS/CORRECTIONS

FAMILY GROUP*	
Details of Changes (Give as much detail as possible)	

Declaration: I declare that the above Information is, to my knowledge, true and accurate and I am authorised on behalf of the relevant members of the family to give permission to the Chung Wah Society Inc to publicly display the information as part of the Chinese Museum Family Trees Project.

Name of Person supplying information _____ Signature and Date _____

Address _____ Contact: email _____

Suburb _____ State _____ PostCode _____ Contact: phone _____