



Historical Society  
of Pennsylvania

## Research by Mail Request Form

1. **Please print** and fill out all sections of this form.
2. Mail this form with a **specific research request and payment** to: Research by Mail, Historical Society of Pennsylvania, 1300 Locust Street, Philadelphia, PA 19107-5699. If you are paying by credit card, you can also fax the form to 215-732-2680.
3. We aim to complete all research requests within approximately 8 weeks of receiving payment. Rush requests will be completed within approximately 2 weeks.

Your name: \_\_\_\_\_ Today's date: \_\_\_\_\_

HSP Member? (circle one) Yes No Daytime phone: \_\_\_\_\_

Street address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

E-mail: \_\_\_\_\_

Send me news about:

- Genealogy and community history
- Education Resources for teachers
- Scholarly events and publications
- Young Friends events and programs
- I do not want to receive e-mail newsletters from HSP

### Research By Mail Fee Schedule (fees subject to change):

Service	HSP Members	Non-Members
Research	\$40 per hour	\$60 per hour
Rush service	+ \$20	+ \$20
Premium service	+ \$15	Not available

**\*\*New / initial requests require a minimum of two hours.\*\***

### Method of Payment:

\_\_\_\_ Check (make checks payable to Historical Society of Pennsylvania)

\_\_\_\_ Credit Card (See below)

Amount \$ \_\_\_\_\_

### Credit Card Authorization:

I hereby authorize the Historical Society of Pennsylvania to charge the credit card number listed below for research/reference services.

Charge to: Visa \_\_\_\_\_ Mastercard \_\_\_\_\_ American Express \_\_\_\_\_

Card number: \_\_\_\_\_ Expiration date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Cardholder name: \_\_\_\_\_

Cardholder signature: \_\_\_\_\_