



ROYAL HOSPITAL CHELSEA

HOME OF THE CHELSEA PENSIONERS

Enquirer	
Name:	Address:
Telephone:	
Email:	Post Code:
Reason for Enquiry:	
Genealogy <input type="checkbox"/>	Publication <input type="checkbox"/>
Education <input type="checkbox"/>	
Other:	(Please specify)
Subject of Enquiry (Please specify as far as possible)	
Individual Name(s)	
Regiment(s)	
Date of Birth	
Service Dates	
Dates at Royal Hospital	
Date of Death	
Other details known:	
General Subject	
Outline Date(s)	
Specific nature of the enquiry, what do you want answered?	
Signature:	Date:
RHC Archives Use Only:	
Date Received	Ref:
Cheque enclosed: (Yes/No)	Processed Date:
Holding Letter Sent	
Date Completed	
Response Letter Sent	
Researcher(s):	