



Researchers Registration Form

<u>Name:</u>	<u>Permanent Address:</u>	<u>Address in Ireland</u> (if different):
<u>Telephone no:</u>	<u>e-mail:</u>	
<u>Research Institute:</u> (County Council (section) university, historical society etc.)		
<u>Purpose / Topic of research:</u>		
<u>Declaration:</u> I have read the rules and procedures for access to the Local Authority Archives and agree to abide by them. I understand that permission to consult the archive may be withdrawn if I fail to observe them. Signature: _____		
<u>Date:</u>		

For Office Use

<u>Reader Number:</u>	<u>Date Issued:</u>
<u>Accessed:</u>	

