Watertown Historical Society
401 Main Street, Watertown, Connecticut 06795
(860) 274-1050
www.watertownhistorymuseum.org

Research Form

Please print clearly and fill in all information.

Personal Information

Name:_____

Address: _____

City:_____

State: _____ Zip Code: _____

Membership

Are you a member of the Watertown Historical Society? Yes No
Are you interested in becoming a member? Yes No

Question/Research Topic

Please describe your question and/or research you would like answered. Attach additional pages if necessary. Please try to give us as much background information that you have available.

_____
_____
_____
_____
_____
_____
_____
_____
_____

Payment and Signature

Please enclose $25 for each question/research topic. Requests for information are fulfilled by volunteers at the museum and are answered in the order received. Allow a minimum of 6 – 8 weeks for a response. The fee includes up to 10 B&W photocopies. Additional copies are $.25 per page and color copies are $ .75 per page.

Signature:_____ Date: _____

Rev. 4.2024