



Washington County Historical Society
49 East Maiden Street, Washington, PA 15301
724-225-6740 Website: www.wchspa.org
E-mail: wchs@wchspa.org

Dear Researcher,

Thank you for contacting us with your inquiry. The Washington County Historical Society is pleased to offer people visiting our library and archives free admission for research purposes. Research that can be done with the resources at the Historical Society will be conducted by our research librarian who can be contacted at research@wchspa.org.

The Society also provides contract research services for information not housed in the Historical Society's library or archives. These services are available for \$20/hour for WCHS members and \$30/hour for non-members. If you are interested in these services please complete the enclosed form and include a check made payable to the 'Washington County Historical Society'. (Please note that checks are not cashed until the research is completed.) Copy costs will be assessed and invoiced once the research is finished.

If you are unable to visit our facility or do not wish to contract with the Society's research service, you may wish to purchase our Introduction to Researching Washington County Kit. It includes various historical maps of Washington County, an overview of county history written by famed historian Boyd Crumrine, an informative fact sheet regarding how to start genealogical research, and a summary of research collections in Southwestern Pennsylvania that might be helpful. The cost for the kit is \$10.00 which includes postage.

Thank you,

Katie West
Curator

Research Fee Policy

1. Persons accessing the library/archives are encouraged to make a donation to help offset the costs of operating the facility.
2. Photocopy fees are \$.25 or \$.50 per copy depending on the size and originating source of the copy.
3. Mail requests for research are charged \$30 per hour for non-members. The fee for members is \$20 per hour. There is a one-hour minimum.
4. Individuals or organizations must complete the attached form in order to publish manuscript or illustrative material. The publication fee is \$50. If the publication is for educational purposes, the fee is \$25. The Washington County Historical Society reserves the right to waive the fee on a case by case basis.
5. Computer imaging is not permitted.
6. There will be a cost for any reproduction of photographs in the society's collection, which will be assessed on a case by case basis. The copyright to the photograph should remain with the Washington County Historical Society. The requester must sign a waiver to any rights to the photograph.

Washington County Historical Society Research Service

In order to better serve you and eliminate unnecessary researching, please fill in the following questions as pertaining to your ancestor.

SURNAME _____

OTHER SPELLINGS OF SURNAME _____

Township/Area Ancestor Lived In _____

Time Frame – (years) _____

Names of Siblings _____

Church Affiliation or Religion _____

Dates of Births _____

Marriages _____

Deaths _____

Occupation _____

I am looking for: ☐ **Proof of Birth** ☐ **Proof of Death** ☐ **Marriage**
☐ **Naturalization** ☐ **Other (Please Explain)**

NOTE: In Pennsylvania there was not state registration of vital records or marriage records until 1885, therefore substitute sources such as newspaper accounts, minister's personal records, church records and cemeteries must be used.

Agreement

Dear Society,

I, the undersigned to hereby agree to compensate the Washington County Historical Society for researching my historical/genealogical requests at a rate of \$30 per hour for non-members, or \$20 per hour for members. The minimum rate is one hour.

I understand that the Society may subcontract with researchers, dependent upon the request and at the discretion of the Society.

The Society will take appropriate precaution to ensure the accuracy of information researched. I agree to indemnify and hold harmless the Society, its successors and subcontractors against any loss from any and all claims, demands, and actions resulting from the inaccuracy of information provided.

I understand that **research may or may not result in satisfying my request**. However, researcher will document sources researched.

I have reviewed the Research Fee Policy attached. I agree that I will make payment in advance for hour(s) of research and other services by credit card or by check made out to the 'Washington County Historical Society'.

By my signature below, this letter shall constitute an agreement to comply with the conditions set forth herein. I execute this agreement the _____ day of _____ 20____.

Number of Hours: _____

Signature: _____

Print Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____ Phone #: (____) ____ - _____

____ Researcher may contact me with questions regarding my request.

____ Check Enclosed

Please charge the above to my credit card: ____ VISA ____ Discover ____ MasterCard

Card Number: _____ Expiration Date: ____/____ CVC: ____