

**Louth County Archives Service**

**READER'S APPLICATION FORM**

For communication, security and statistical purposes only. Information will not be passed on.

**Please write legibly and give to Archive Staff**

**Surname..... First Name.....**

**Permanent Address.....**

.....

.....

**Address in Ireland (if different).....**

.....

**Telephone Number & Code.....**

**Mobile Telephone Number.....**

**Subject of Research .....**

.....

**Purpose of Research.....**

**If attached to a university, society or other institution, please give details.....**

.....

**Declaration by Applicant**

**I have read the Rules for Readers and Reading Room Procedures and agree to abide by them**

**Signature..... Date.....**

**For Staff Use Only**

**Supervisor..... Date.....Date-Stamp**