

Information Request Form
Your Details Date of Enquiry:
Title Mr/Mrs/Miss/Ms/Other (please state):
First Name: Surname:
Address:
City: County:
Post Code: Country:
Telephone (Day): E-mail:
Details about the individual you wish to research:
Surname: DoB:
First Names:
Rank: Service Number:
Battalion/Unit:
Place of Birth: Place of Residence:
Enlistment Town and Date:
Trade/Occupation: Dates of Service:
Where Served:
Medals and Awards:
Discharge date and reason:
Killed in Action [] Died of Wounds [] Other Reasons []
Any Additional Information

Cumbria's Museum of Military Life The Castle, Carlisle, Cumbria CA3 8UR T 01228 532774 enquiries@cmoml.org www.cumbriasmuseumofmilitarylife.org







