

Genealogy Request Form



Albany Rural Cemetery Genealogy Request Form

Organized under the NYS Rural Cemetery Act of 1847

Non-profit | Non-sectarian | Not state or federally funded

Applicant Information

Full Name: _____

Address: _____

Phone Number: _____

Email: _____

Preferred Method of Contact: Email Phone Mail

Genealogy Request Details

Name of Deceased (Required): _____

Date of Death (if known): _____

Section & Lot Number (if known): _____

Relationship to Deceased (if any): _____

Purpose of Request: _____

Service Options & Fees

As outlined in our General Price List (Effective March 2025)

- Genealogy Research (1 name) – \$15.00
- Each additional name – \$15.00
- In-person Research Appointment (Tues/Thurs only) – \$50.00
*Limit one hour per session; by advance appointment only. *

Payment Information

- Check enclosed
- Money Order enclosed

Make checks payable to: Albany Rural Cemetery

All genealogy requests must be paid in advance. Requests are non-refundable.

Acknowledgment

I understand that this form is for genealogical research purposes only and that information will only be provided on individuals confirmed to be interred at Albany Rural Cemetery. No information will be provided on burials occurring within the past 50 years unless documentation of direct lineage is submitted.

Signature: _____

Date: _____