

**Sewall-Belmont House and Museum  
Image Duplication and Permission Request Form**

**Date of Request:** \_\_\_\_\_ **Customer Order Number:** \_\_\_\_\_

Please print legibly. Original Signature required.

**Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Organization:** \_\_\_\_\_

**Address (Street, City, State, Zip Code):** \_\_\_\_\_

\_\_\_\_\_

**Country:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_ **Facsimile:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Website (if applicable):** \_\_\_\_\_

**Mailing Address (if different from above):** \_\_\_\_\_

\_\_\_\_\_

**I. REQUEST FOR DUPLICATION**

**Type of Prints:**      \_\_\_ Custom              \_\_\_ Exhibition              \_\_\_ Other:

**Please provide the following information. If you need more room, continue writing on the back of the form:**

DIGITAL ID NUMBER	CALL NUMBER	MEDIA TYPE	ITEM IDENTIFICATION (CAPTION)	PRINT SIZE	ORIGINAL OR RESTORED IMAGE*	COPIES	DUPLICATION FEE	PERMISSION FEE	TOTAL FEES

\* Any requests for restored Images will be invoiced to you separately.

**Special Duplication Instructions:**

---

---

**II. REQUEST FOR PERMISSION TO USE**

Please be as specific as possible in responding to requests below.

**Please state in detail your proposed use of the Image(s) (even if your proposed use is for personal or non-commercial use):**

---

---

---

---

**Please state the expected duration of your proposed use:** \_\_\_\_\_

**If your proposed use of an Image copy includes use in a publication or broadcast program in any media, please provide the following information:**

**Title:** \_\_\_\_\_

**Edition:** \_\_\_\_\_

**Description of Project:** \_\_\_\_\_

---

---

**Type of Publication or Media Format:** \_\_\_\_\_

**Estimated Print Run or Distribution:** \_\_\_\_\_

**Estimated Cover or Purchase Price (if applicable):** \_\_\_\_\_

**Estimated Date of Publication:** \_\_\_\_\_

**Company Address and Contact Information:**

(i.e., author, publisher, director, producer, production company, ad agency, etc. if different from above)

**Name:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Organization:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax: \_\_\_\_\_

Total Reproduction Fees: \_\_\_\_\_

Total Permission Fees (including discounts, if any): \_\_\_\_\_

Additional Charges for special requests: \_\_\_\_\_

Packaging and Mailing Charges: \_\_\_\_\_

Total Cost of Order: \_\_\_\_\_

**Delivery of Duplication Order:**

\_\_\_\_\_ Customer Pick-Up      \_\_\_\_\_ Mail      \_\_\_\_\_ Federal Express  
\_\_\_\_ Other: \_\_\_\_\_

Delivery Service Customer Account Number: \_\_\_\_\_

**Method of Payment:**      \_\_\_\_\_ Check      \_\_\_\_\_ Credit Card

**Credit Card Payment**

\_\_\_\_\_ MasterCard      \_\_\_\_\_ Visa      \_\_\_\_\_ American Express      \_\_\_\_\_ Discover

Name as it appears on card: \_\_\_\_\_

Credit Card Account Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

**USAGE AUTHORIZATION AND RESTRICTIONS**

All permissions shall be non-exclusive, non-transferable, and limited to the specific uses proposed above and the Terms Governing the Reproduction and Use of Images set forth on the NWPcollection.org web site.

I have read the above information as well as the Terms Governing the Reproduction and Use of Images and understand and agree to be bound by the contents and provisions of both documents. I understand that completing this application in no way implies formal permission by the National Woman's Party to use the above images. I further understand that I am not permitted to use or publish the images in any form until I have received a copy of this form countersigned by the National Woman's Party indicating its approval of my request for duplication and usage of the Images for the limited purpose set forth above.

**I also agree that any additional duplication or use of the Image copies I have requested, other than as specifically set forth above, is prohibited, unless the NWP has approved new Image Duplication and Permission Request Forms that provide for such additional copies and uses.**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Name (please print):** \_\_\_\_\_ **Title:** \_\_\_\_\_

**APPROVAL** (To be signed by an authorized representative of the National Woman's Party)

The National Woman's Party has reviewed your request for duplication and usage of the Images as set forth above and hereby grants you permission to use such Images as requested herein, provided that your use of such Images complies at all times with the Terms Governing the Reproduction and Use of Images set forth on the NWPcollection.org web site.

**THE NATIONAL WOMAN'S PARTY**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please mail application and all attached materials to:

**Collections Manager  
The Sewall-Belmont House and Museum  
144 Constitution Avenue, NE  
Washington, DC 20002**

**FOR OFFICE USE ONLY**

\* \* \* \* \*

**Staff Notes**

Patron Pickup or Shipment:

Date of Expected Pickup:

Total Cost of Order:

Method of Payment:

Amount Received:

Hold Required for Permission Clearance:

Date Sent to contractor:

Date Returned:

Contract Duplication Expenses:

Date of Shipment or Pickup Completed:

Notes: