

4000 Michigan Road Indianapolis, IN 46208-3326 t 317-923-1331 f 317-926-8931

imamuseum.org

archives@imamuseum.org

## **ARCHIVES REPRODUCTION REQUEST FORM**

Thank you for your recent request for images from the Indianapolis Museum of Art Archives. In order to process your request, we need to determine what kind(s) of document scan(s) and/or photograph(s), reproduction rights, and fees (if applicable) are involved. Image requests must be submitted four to six weeks prior to the date the material(s) are needed to ensure adequate processing time.

Please fill out the following in as much detail as possible.

1.	Contact Information:
	Name:
	Address:
	Telephone:
	Fax:
	E-mail: Title:
	Business:
2.	Image(s) *Please attach a separate sheet if you need more room:
	Collection Name/Number:
	Description of archival material to be reproduced:
2	Dermission is Paguestad to Panraduse:
3.	Permission is Requested to Reproduce:  In Whole In Detail In Color In Black & White
4.	Image Requirements:
	☐ High Resolution Digital File (Publication) ☐ Low Resolution Digital File (Personal Use)
	Scan to FTP Size Scan to Disc Size Size Slack & White Print Size
	<del></del>
5.	Intended Use of Image(s):
	As a Cover As an Interior
6.	For Reproduction In:
	Book / Magazine / Journal
	Electronic Book / Electronic Journal
	Television Broadcast / Film / Video
	Website / Internet
	Other Multimedia (Software, CD-ROM, etc.)
	Advertising Materials (Brochures, Flyers, etc.)
	☐ Promotional Materials (Posters, Calendars, Postcards, etc.) ☐ All Other Uses (Please Describe):
7.	Publication / Project Information:
	Title of Publication / Project:
	Author / Director / Producer / Designer: Publisher:
	Number of illustrations:
	Approximate Publication / Release Date:
	Print Run Quantity:
	Estimated Price of Publication / Project:
	Countries of Distribution:
	Language(s) of Publication / Project:
	Date Materials Needed By:

## 8. Additional Relevant Information: