

ASPEN HISTORICAL SOCIETY

**PHOTOGRAPHIC & RESEARCH
REQUEST FORM**

Are you a member of Aspen Historical Society? ____ Yes ____ No

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Company (if applicable):

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Telephone:

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Please describe usage:

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Signature: _____ Date: _____

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Photo Order:		
Format: _____ Scan _____ Print If Print, date to WH: _____		
Accession Number	Envelope Number	Size
Billing Information:		