

Research Library & Resource Center Image Reproduction Order Request

Date:		
Name:		
Address:		
Telephone:	Email:	
Membership in	NHS?	
Description of i	intended use:	
Reproductions	requested:	
Staff Member:		
the Newport Hi NHS Collection	image reproduction order request, I acknowledge at that I have read and understonistorical Society's Research and Use policy. I understand that if I intend to utilize is images in a scope beyond personal or research use, I must request a Permission to a spropriate payment based on the scope of any proposed project.	
Y	Data	