

# McCreary County Museum

Preserving the history of McCreary County  
P.O. Box 452 Stearns, Kentucky 42647 \* Phone 606-376-5730 \* Fax 606-376-5332

## PHOTOGRAPH COPY REQUEST FORM

### CUSTOMER INFORMATION

Date Requested: \_\_\_\_\_ **Fields Marked with \* are required.**  
Name\*: \_\_\_\_\_ Phone Number\*: \_\_\_\_\_  
Address\*: \_\_\_\_\_  
E-Mail Address\*: \_\_\_\_\_ Business Affiliation: \_\_\_\_\_  
Museum Affiliation:  Member  Non-Member, Local  Non-member, Out of Town  Volunteer

\*\*Note: Please allow up to 4-6 weeks for your photograph copy requests to be processed and received. Copy fees must accompany this form. If your request is denied due to donor limitations or copyright laws your fees will be returned. We reserve the right to deny any request.

### PHOTO REQUEST DETAILS

Complete the form and give it to the docent at the Museum or mail it to P.O. Box 452 Stearns, Kentucky 42653.

**Indicate your request in the space provided below:**

**Please provide a detailed description of the photo you are requesting a copy of:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Photograph Accession Number(s) if known :** \_\_\_\_\_

**Exhibit Photograph was viewed in:** \_\_\_\_\_

### PHOTOGRAPH ORDER FORM

Size	Volunteer Cost	Member Cost	Non-Member Cost	No. of Copies Requested X Cost
8X10	\$8.00	\$10.00	\$12.00	_____
5X7 (Includes 2 Copies)	\$8.00	\$10.00	\$12.00	_____
4X6	\$1.00	\$2.00	\$3.00	_____
			<b>Total Cost</b>	_____

### FOR MUSEUM USE ONLY

Date Replied: \_\_\_\_\_ Staff Signature: \_\_\_\_\_

Comments: \_\_\_\_\_

Photograph Accession Number(s) Copied: \_\_\_\_\_

Request Denied: \_\_\_\_\_

Fees Returned: \_\_\_\_\_

McCREARY COUNTY  
**MUSEUM**  
PRESERVING OUR PAST