COLUMBIA COUNTY HISTORICAL & GENEALOGICAL SOCIETY
225 Market Street, P. O. Box 360, Bloomsburg, Pennsylvania 17815

REQUEST FOR PURCHASE OF PHOTOGRAPHS & REPRODUCTION RIGHTS

Name: _____ Address: _____

City: _____ State: _____ Zip: _____ Date: _____

Telephone: _____ E-Mail: _____ ☐ I am a member of the Society.

(Please read the Society photograph policy.)

I have read the Society's photograph policy and agree to use the photographs as stated.

Signature _____ Date _____

SELECT APPROPRIATE CATEGORY OF INTENDED USE OF THE REQUESTED PHOTO

_____ Personal Use Only _____ Publication

_____ Commercial _____ Public Presentation

Please describe your intended use of the photograph(s) and any special instructions. _____

_____

_____

Photo Number	**Brief Description of the Photograph**
_____	_____
_____	_____
_____	_____

(If additional lines are needed, please use the second sheet to this form.)

PHOTOGRAPH USE FEE SCHEDULES

Intended Use	**B&White/Color**	**B&White/Color**	**Scan on paper**
Check appropriate box	8 x 10 size	9 x 15 size	8½ x 11 sheet
☐ Personal Use Rights / **circle choice →**	$15.00 per copy	$20.00 per copy	$3.00 per copy
☐ Commercial Use Rights	$25.00 per copy		+$1.00 postage
☐ Publication Use Rights	$25.00 per copy		
☐ Public Presentation Use Rights	$15.00 per copy		

No. of photos _____ Cost of photographs _____

Less CCHGS members 30% discount for cost of photos for Personal Use only _____

Sub-total of charges _____

Add PA Sales Tax 6% if a Pennsylvania resident _____

Add mailing and handling costs $4.00 Oversize $6.00 (9 x 15 or tube) _____

Sub-total of charges _____

Less discount of 20% for orders of $100 or more (see **discount notice** at bottom of sheet) _____

TOTAL COST: _____

Prepayment must accompany your photograph order.

Discount Notice: If a request for photos comes to $100 in each or a combination of these categories, Commercial, Publication, and Public Presentations, a 20% discount is offered. It applies only to the cost of photos.

Revised October 13, 2009

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Name: _____ Address: _____

City: _____ State: _____ Zip: _____ Date: _____

LIST THE NUMBER OF THE PHOTOGRAPH AND BRIEF DESCRIPTION

Number	Brief Description of Photograph