



Image Reproduction Application

Please complete, sign and return both copies of this form. A countersigned copy will be returned to you for your files. Please read the conditions governing permission for reproduction listed on the back of this form.

Name:
Address:
Phone:

Hereby applies to the Charles E. Burchfield Foundation for permission to reproduce the following:

Artist, Title, Date, Medium, Size, Credit Line

Charles Burchfield

For publication in: Project type: **hard/soft publication**

Brief description:
Book size:
Image size:
Image location:
Print run:
Deadline for images:
Language:
Territory of distribution:
Author:
Publisher:
Edition:

This permission applies only to the publication specified. A new application must be filed for each subsequent publication. The applicant agrees that this permission, if granted, shall be subject to the conditions listed below, and further, agrees to pay promptly any necessary charges.

Applicant's Signature

Permission to reproduce the material listed above, in compliance with the conditions checked, is hereby granted.

Date

The Charles E. Burchfield Foundation or Representative

Conditions Governing Permission For Reproduction

_____ Permission is granted for one-time use only.

_____ No cropping, overprinting, or printing on colored stock without written permission of the Charles E. Burchfield Foundation.

_____ Full identification of art work must be given, including the artist's name (with birth and death dates), the title, date, medium and size of the art work, as well as the appropriate credit line. Please use all of the following information in identifying the photograph:

In addition to owners requested identification, identification should include, 'reproduced with permission of the Charles E. Burchfield Foundation'.

_____ When requested, color proofs must be submitted before publication and approved in writing by the Center.

_____ The publisher is to provide the Burchfield Penney Art Center and the Burchfield Foundation with 4 copies of the complete publication in which the reproductions appear.

_____ Reproduction fee: _____

_____ Photographic materials: _____

Total:

Please make checks payable to the Burchfield Penney Art Center. Thank you.