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(Fees below are effective 10/27/2022)

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**Permission Form/Invoice for Image Use**

**Name of Applicant:** \_\_\_\_\_  
**Mailing Address:** \_\_\_\_\_  
**City, State, Zip:** \_\_\_\_\_  
**Telephone:** \_\_\_\_\_  
**Email:** \_\_\_\_\_

**Description of Project**

Personal    Small Non Profit    Commercial/Large Non Profit    Student

**Nature of Project**

\_\_\_\_\_

**Statement of responsibility:** I certify that the information on this form is correct and I accept the conditions of use. I am authorized to enter into this agreement on behalf of the above named organization.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

**Use fee (if applicable):** \_\_\_\_\_

**Production fee:** \_\_\_\_\_

**Total amount of payment** \_\_\_\_\_

Identification number	Title or Description

**Send this form with payment to:**

Washington Township Museum of Local History - 190 Anza St., Fremont, CA 94539  
or email it to: [info@museumoflocalhistory.org](mailto:info@museumoflocalhistory.org)

Payment accepted – Cash, Check, and PayPal

If using PayPal, please use this link: <https://tinyurl.com/wtmlhpaypal>

Questions? Let us know! [info@museumoflocalhistory.org](mailto:info@museumoflocalhistory.org) and 510-623-7907

Thank you!