

**Kauai Historical Society**  
**DUPLICATION ORDER & USAGE RIGHTS AGREEMENT**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Organization/Business: \_\_\_\_\_

Address: \_\_\_\_\_

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Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Date Paid: \_\_\_\_\_

DELIVERY INSTRUCTIONS:  Pick Up  Ship  Electronic

Usage fees allow us to collect, preserve, and share the history of our island home. Mahalo!

Collection or Photo ID # and Brief Description	Media or Document & Quantity	Price per Unit	Total

**USAGE TYPE:**

**Advertising**  
**Editorial/Journalistic**  
**Personal**  
**Tax Exempt**

**Commercial**  
**Educational/Academic**  
**Non-Profit**

**PLEASE PROVIDE MORE DETAILED INFORMATION:**

**PUBLICATION:**

Title: \_\_\_\_\_ Publisher: \_\_\_\_\_

Estimated Publication Date: \_\_\_\_\_ Circulation/Press Run: \_\_\_\_\_

**ADVERTISING:**

Agency: \_\_\_\_\_ Product: \_\_\_\_\_

Media Type \_\_\_\_\_

**MOTION PICTURE FILM, TELEVISION, WEBSITE:**

Name of Production: \_\_\_\_\_ Producer: \_\_\_\_\_

**DISPLAY OR EXHIBITION:**

Location of Display: \_\_\_\_\_

Dates: \_\_\_\_\_

Responsible Party: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

**PAYMENT TYPE:**

Cash

Check

Credit Card

Purchase Order

FOR CARD PAYMENTS IF CARD NOT PRESENT:

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Billing Address Zip Code: \_\_\_\_\_

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Office Use Only: Date Received: \_\_\_\_\_ Received by: \_\_\_\_\_ Completed by: \_\_\_\_\_

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**Signature**

**Date**

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