

the Gilder Lehrman Institute of American History
19 West 44th Street, Suite 500 New York, N.Y. 10036 T: (646) 366-9666 F: (646) 366-9669

***History Now* REPRODUCTIONS PERMISSIONS REQUEST FORM**
(Transcript or Quotation for Private Use ONLY)

Name _____ Telephone _____ Email _____
Organization _____ Address _____
City _____ State _____ Zip _____

1. The Gilder Lehrman Institute of American History allows for **free**, private use of *History Now* subject to the Terms and Conditions outlined in the Reproductions Permissions Agreement.
2. **Private use includes educational instruction.** All other eligible uses are to be determined solely by the Gilder Lehrman Institute of American History.
3. Reproductions permissions do not constitute permission to use *History Now* in publications that will generate income. Please submit a Publication, Broadcast, or Display Permissions Request Form to obtain those permissions.
4. Please allow 4 to 6 weeks to process the request.

Applicant requests reproduction permission(s) for the following:

Issue _____ **Date** _____ **Author** _____ **Article** _____
URL _____

Issue _____ **Date** _____ **Author** _____ **Article** _____
URL _____

USE:

- Educational (please specify) _____
 Other (please specify) _____

RIGHTS:

- North American Rights International Rights

If applicable, name or description of publication in which work(s) will appear: _____

If applicable, approximate date of publication: _____

Please return a signed and dated original of this Reproductions Permissions Request Form to Gilder Lehrman at the above address or in a fax (646-366-9669). A signed, scanned copy may be emailed to permissions@gilderlehrman.org.

Signature _____ Date _____