



## Rights and Reproduction Questionnaire

### Form 5: Research and Presentation Use

#### CONTACT INFORMATION

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

Company/Institution: \_\_\_\_\_

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

City: \_\_\_\_\_

Postal Code: \_\_\_\_\_

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

#### INVOICE INFORMATION

Same as above

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

Company/Institution: \_\_\_\_\_

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

City: \_\_\_\_\_

Postal Code: \_\_\_\_\_

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

#### OBJECT INFORMATION

Accession Number: \_\_\_\_\_

(Please attach a thumbnail image and description to your email if the accession number is not available)

#### PRESENTATION/LECTURE INFORMATION

Presentation Description:

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

Location: \_\_\_\_\_

Presenter: \_\_\_\_\_

Presentation Date: \_\_\_\_\_

#### RESEARCH PROJECT DESCRIPTION:

Email the completed form to [Imagerequest@agakhanmuseum.org](mailto:Imagerequest@agakhanmuseum.org).

Please allow 3-4 weeks for processing.



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**FOR CURATORIAL USE ONLY**

DATE:

REFERENCE NUMBER: