



# THE AMERICAN CHESTNUT FOUNDATION

## *Media Permission Request Form*

Date of Request: \_\_\_\_\_

Date Required: \_\_\_\_\_

Organization/Publication (*Please provide address/contact information, if different from person ordering below*):

\_\_\_\_\_  
\_\_\_\_\_

Is this a nonprofit organization? \_\_\_\_\_

Purpose: \_\_\_\_\_

\_\_\_\_\_

Items Requested (*Please be specific*):

- |          |           |
|----------|-----------|
| 1. _____ | 6. _____  |
| 2. _____ | 7. _____  |
| 3. _____ | 8. _____  |
| 4. _____ | 9. _____  |
| 5. _____ | 10. _____ |

Format, Resolution, Size, etc.: \_\_\_\_\_

(*Photos: jpg, tiff, gif, 72dpi, 200dpi, 300dpi, measurements in inches, ie 4"x5."*) (*Text: text file, word file, pdf, etc.*)

Requestor:

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

Organization/Company: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email\* (*required*): \_\_\_\_\_

**Please email completed form to Jules Smith at: [jules.smith@acf.org](mailto:jules.smith@acf.org).**

Note: Permissions requests may take up to two weeks to process.