WAR HERITAGE INSTITUTE

N° invoice and date

Date dispatch repro

Royal Museum of the Armed Forces and of Military History (RMM) Conditions for reproduction

Request for reproduction	of RMM colle	ection items
(PLEASE COMPLETE	E IN BLOCK	CAPITALS)

	•
I,	
(full address)	
Tel.:	
E-mail:	
acting for	
address, tel. and e-mail:	
commit to respecting all reproduction terms as copyright.	nd conditions, especially those regarding
I ask the RMM to supply the reproductions m reproductions" form, according to the fees and	•
I am aware of the fact that the task will only be the RMM will have been paid in full.	be carried out once the invoice established by
In the case of publication, I undertake to send address: War Heritage Institute, Documents BRUSSELS	two copies of the publication to the following ation Centre, Jubelpark 3, B-1000
Signature	Date
Reserved to Museum administrative services	
Date reception	N° order form

Date payment

Remark	S				
List of requested reproductions					
Publishe	r:	ected date of publication:	Private use or research*		
Telephone: E-mail: One of the reproductions will be used on the cover or on a poster *. Remarks:					
* delete as appropriate					
N°.	Inventory number	Subject	Remark picture		
1					
2					
3					
4					
5					
6					
Signatui 	re and date:				