Nottinghamshire County Council

Nottinghamshire Archives

EXHIBITION BOOKING FORM (for long term exhibitions)

Name of Organisation ……

Contact Name ……

Address……

……..Postcode……

E-mail……Telephone……

Exhibition title……..

Venue……

Telephone ……

Period of exhibition: from……to……..

Specific document(s) requested.....

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Declaration: I wish to exhibit the above document(s) and agree to the conditions overleaf.

Signature .....Date …….....

Printed name……Date……..……

Position within organisation……..

Signed on behalf of Nottinghamshire Archives……..

Printed name……..……..Date……..……

Position within organisation……..……..……