

# RESEARCHER REGISTRATION FORM

## *Shaker Village of Pleasant Hill Collections and Archives*

Name (last, first): \_\_\_\_\_

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

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

\_\_\_\_\_

\_\_\_\_\_

***Please check any which apply:***

- |   |   |
|---|---|
| <input type="checkbox"/> Shaker Village Staff | <input type="checkbox"/> Undergraduate Student          |
| <input type="checkbox"/> Intern               | <input type="checkbox"/> Family Historian/Genealogist   |
| <input type="checkbox"/> Volunteer            | <input type="checkbox"/> Shaker Village Research Fellow |
| <input type="checkbox"/> Graduate Student     | <input type="checkbox"/> Other _____                    |
| <input type="checkbox"/> Museum Professional  |   |

**Research topic(s) & Purpose of research:**

*(Term paper, book, article, thesis, dissertation, genealogy, other; please be specific)*

\_\_\_\_\_

\_\_\_\_\_

**How did you first learn about the collections at Shaker Village of Pleasant Hill?**

\_\_\_\_\_

\_\_\_\_\_

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Responsibility for obtaining permission to publish manuscript material rests with the researcher and his/her publisher. Permission for publication should also be obtained from the Shaker Village of Pleasant Hill as holders of the property rights.

I have read and agree to abide by the Procedures and Regulations of the Archives at Shaker Village of Pleasant Hill (see adjoining document). Failure to comply with these rules may result in the denial of access to the collections.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_



***FOR ARCHIVIST USE***

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**COLLECTIONS:**

*Today's Date*

*Collection/Call Number*

*Boxes, Folders, or Items*

