## Museum of Photography in Kraków Collection Research Request Form

Applicant's details		
Name or affiliation (full name)		
Person authorised to sign the form	Please complete only when you represent your instituti	ion
Address		
ID number		
Phone		
Email		
Invoicing details Name/taxpayer's TIN/ID of legal entity/Registration No		
Statements		
I confirm that I shall not use the received digital reproductions of objects for purposes other than to study the Museum collection and that I shall not make them available in any form to third parties. Should the use the digital reproductions of objects breach the above statement or should the use of the said reproductions infringe upon third parties' copyright (economic or moral rights), I undertake to satisfy, at my own expense, any justified claims made by third parties due to the infringement of the rights thereof, and in the event the Museum satisfies such claims or they are awarded against the Museum, I shall reimburse the Museum, at the Museum's demand, for all the claims covered and all related expenses incurred, including judicial costs, the cost of arbitration, administrative or conciliation proceedings, and indemnify the Museum against any losses suffered by the Museum as a result of the above breach.  I consent to the processing of my personal data for the purpose of carrying out research into MuFo collection, including for the dissemination of information about the collection. The data will be processed for the time necessary to conduct the research study and thereafter for the limitation period prescribed for claims that may be raised in connection therewith. I confirm that I have read		yes/no* yes/no*
the privacy notice at: <a href="https://mufo.krakow.pl/privacy-policy">https://mufo.krakow.pl/privacy-policy</a> .  I confirm that I have read and agree to abide by the Terms and Conditions of collection research and ordering digital reproductions of objects from MuFo collection available at:		yes/no*
https://mufo.krakow.pl/museum/services.		
Subject to be studied		
Please be specific about the subject and material to be covered by your research		
Quotation (to be completed by a MuFo employee for chargeable research studies)		
Signature and date		

<sup>\*</sup> Please indicate as appropriate