

## Chaco Culture NHP Researcher Registration Form

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

Institutional affiliation: \_\_\_\_\_

Work address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

Home address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Purpose of Research:**

research  publication  photography  personal interest  interpretive program  exhibit

**Research project summary:** \_\_\_\_\_

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**Publication Plans** (publisher, type of publication, date): \_\_\_\_\_

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**Requested Materials:** (Identify specific items; attach additional sheets if necessary)

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**Date of Proposed Visit:** \_\_\_\_\_ **Alternate Date:** \_\_\_\_\_

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**NPS Collection Use:**

Picture ID card type, State Control Number: \_\_\_\_\_

Contacted Park through:  Visit  Letter  Phone call  Fax  E-mail  In person  FOIA

Research Log No.: \_\_\_\_\_ Duplication Form Numbers: \_\_\_\_\_

Collections used (name/number, acc no., box no; use reverse): \_\_\_\_\_

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