



NEBRASKA HUMANITIES COUNCIL EXHIBITS APPLICATION FORM

*This application is only for exhibits housed at the NHC.
For all other exhibits, please contact the appropriate site.*

Organization _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

Email _____

PROJECT DIRECTOR

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ (day) _____ (evening)

Email _____

Name and phone number of second contact person _____

Name of Exhibit you want to borrow _____

Date you want Exhibit (minimum 14 days notice) _____

Date you will return Exhibit _____

RETURN TO:

**Nebraska Humanities Council
215 Centennial Mall South, Suite 330
Lincoln, NE 68508**

DEADLINE: 14 DAYS BEFORE PROGRAM