

American Museum of Natural History  
DEPARTMENT OF MAMMALOGY  
Visitor Registration Form

Name: \_\_\_\_\_ Current Title/Position: \_\_\_\_\_

Institution: \_\_\_\_\_

Department: \_\_\_\_\_

Institution Address: \_\_\_\_\_

City/State: \_\_\_\_\_ Country/Postal Code: \_\_\_\_\_

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

Are you a student?      Yes      No

Name and email of Advisor: \_\_\_\_\_

Current education level: \_\_\_\_\_

*Students must include a letter of support from their advisor, stating the student's experience working with museum specimens as well as past experience with the proposed research.*

Approximate date of last visit: \_\_\_\_\_

Proposed dates/duration of visit: \_\_\_\_\_

Purpose of research and taxonomic groups to be studied (please include a detailed list of genera requested with estimated times for each):

Proposed methods (e.g., photography, digitizing, caliper measurement, etc.):

*Museum policy states that 3D scans of specimens must be uploaded to Morphosource.*

If you are requesting to remove specimens from the department or do any molding, casting, dissection or tissue sampling you are required to submit additional forms.

**Loan and destructive sampling request forms can be found on the**  
**[AMNH Mammalogy Website](#).**

*Please email this form and advisor's support letter (if required) to [mammvisits@amnh.org](mailto:mammvisits@amnh.org).*