

B A K E R
A R B O R E T U M
D O W N I N G
M U S E U M

COMMERCIAL PHOTOGRAPHY/VIDEOGRAPHY APPLICATION

Date of Application: _____

Company/Organization: _____

Contact Name and Affiliation: _____

Business Phone: _____

Cell Phone: _____

Email: _____

Requested Date(s): _____

Alternate Dates(s): _____

Start Time Requested: _____

Finish Time: _____

Type of Photo/Video Equipment:

Arboretum location(s): _____

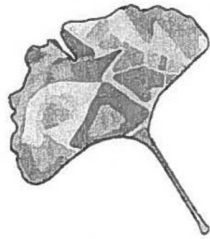
Describe the Nature of the Shoot. What will the photography/video be used for? How/when will it be shown? (Use additional sheet if necessary):

Total number of people involved (including, but not limited to, photographer or camera persons, crew, production assistants, on camera talent, and other persons to be on site during shoot): _____

Please verify:

I have read and agree to abide by all rules set forth in the Baker Arboretum Photography Policy.

I understand that failure to comply with the policy could result in our being asked to leave the premises and forfeiture of fees.



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I understand that, upon approval of this application, I must remit a business or cashier's check made payable to the Baker Foundation for the total shoot amount no later than two business days before photography/filming is to take place. I understand that I will be held liable for all damages and incidental costs that may occur during the session defined above.

Applicant's Signature: _____

Date: _____

Return to:

Baker Arboretum
P.O. Box One
Bowling Green, KY 42104

Phone: (270) 799-2001
email: paulaskaggs@jerryebakerfoundation.org

For internal use only

Approved by: _____	Date: _____
Total Fees Due: _____	
<input type="checkbox"/> \$ _____ Fees Paid	Date: _____
<input type="checkbox"/> Certificate of Insurance	Date: _____
Notes: _____	
