**Fitness Center Filming and Photography Request**

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Location in Fitness Center \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Day, date and time of day you wish to film or photograph in the Fitness Center (The Fitness Center closes at 2pm on the day prior to any break: Fall Break, Thanksgiving, Winter Intercession, Spring Break, Easter

Weekend)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Project Faculty Contact Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Fitness Center Filming and Photography Policy**

**Terms of Use Contract**

Before granting permission to film or photograph in the Ithaca College Fitness Center a Fitness Center staff member must review and approve each submitted request. Submitting a request does not automatically gain permission for a “shoot.” Requesters should present an outline or storyboard for each project. The Fitness Center reserves the right to refuse any application for filming or photography.

The following activities are not permitted:

* No filming in any locker room
* No filming people without prior consent
* Only film in the approved area
* If move any equipment must return to original location
* Do not restrict any route of access or egress (blocking any aisle or walkway)
* Only way to film outside normal building hours must pay for supervision and someone on Fitness Center Staff has to be willing to work scheduled time requesting

The Fitness Center expects students to obey all rules of the Ithaca College Fitness Center and those in the Ithaca College Student Handbook. You are also responsible for your equipment, the actions of crew, etc. at all times.

I have read and agree to these terms.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant’s signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fitness Center staff signature

Please bring this completed form to the Fitness Center main office (Room 202) for review and approval.

Date of review:

Decision: