RICE UNIVERSITY ON-CAMPUS PHOTO SHOOT & FILMING REQUEST

Complete and submit a minimum of five (5) working days prior to required decision date. Office of University Relations, (713) 348-6286, FAX: (713) 348-6751

Person or Group Making Request:_					
Contact:	Name				
	Name		1		
	Day Phone	Evening Phor	le	FAX Number	
	Mailing /	Address		ZIP	
Name of Client:					
Nature of Shoot:	Please check appropriate boxes and provide complete details of intended usage (see rice.edu/photo):				
Details: Please include	[] Exterior	[] Video] P ا News (۳] [] [] Charita [] Individu	eature Film/Documentary rint Advertising (List Publications) roadcast Advertising (List Stations) Name Program and Network) ble/Not for Profit	
			<u></u>		
Requested Date(s			Time:		
Requested Site(s)): Please be specifi	c. Refer to locations by buil	ding names and num	nbers on campus map (<u>rice.edu/maps</u>	

Vehicles: List and describe all vehicles to be brought onto campus. <u>Asterisk (*) those needed at the shoot site(s)</u> .						
Location Fees: Location fees for photographic use of Rice Campus						
		Day (5-10 hours) Day (1-5 hours)	\$2,000 \$1,000			
	Still Photos Full Day (5 1/2-[-10 hours) Day (1-5 hours)	\$ 1000 \$ 500			
	NOTE: Additional charges may be required for shooting outside normal staff hours and /or for unusual power, security, or site preparation requirements.					
	Rice University Ir	iternal Use Only				
Initial Inquiry: Date: Forms Sent: Date:		Time: a.m. / p.m. Time: [] Email []Fax []Mail []Pick-Up				
Documentation:	 Insurance Certificate Conditions for Use Photo Shoot Request Script/Copy 	Date: Date: Date: Date:				
Routing:	[]PRES []F&E []RUPD	[]Other:				
Approval:	[]Granted []Denied	Date:				