



# THE TOLEDO ZOO

## COMMERCIAL FILM & PHOTOGRAPHY APPLICATION

**Application Date:** \_\_\_\_\_

**Date(s) Requesting to Shoot:** \_\_\_\_\_ **Rain Date(s):** \_\_\_\_\_

**Company/Organization Requesting Shoot:** \_\_\_\_\_

**Project Description:** *(Please provide as much detail as possible about the project and the intended usage of the footage/photos)*

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**Specific Use of Materials:** *(Please give names of programs, publications, etc)* \_\_\_\_\_

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**When will it run/publish/timeframes of usage?** \_\_\_\_\_

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**Will video/images be sold?** \_\_\_\_\_ **Estimated lifespan of product:** \_\_\_\_\_

**Will you be shooting Toledo Zoo visitors?** \_\_\_\_\_ **Employees?** \_\_\_\_\_

### Contact Information:

**Contact Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Fax Number:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Size of Film Crew:** \_\_\_\_\_ **Number of Talent:** \_\_\_\_\_

**Number of Vehicles:** \_\_\_\_\_ **Estimated Length of Shoot:** *(days and # of hours per day)* \_\_\_\_\_

**Arrival Time:** \_\_\_\_\_ **Set-Up/Tear-Down Time Needed:** \_\_\_\_\_

**Equipment to be Used & Quantity of Each:** \_\_\_\_\_

\_\_\_\_\_  
**Special Equipment Needed:** \_\_\_\_\_ *(over)*

**If more than a one day shoot, is overnight storage or parking requested? If so, please specify:** \_\_\_\_\_

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**Electricity Hook-Up Needed:** Yes \_\_\_\_\_ No \_\_\_\_\_

**Requested Location(s) Within the Zoo for Filming (if more than one location, please specify time at each):** \_\_\_\_\_

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**Other Information:** \_\_\_\_\_

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*The Toledo Zoo reserves the right to cancel any shoot at any time if it is not in the best interest of the Zoo animals or visitors, or if it defies the Zoo's mission or any of the guidelines outlined in the Commercial Film and Photography Guidelines*

\_\_\_\_ I have read and agree to the terms of the Commercial Film and Photography Guidelines.

\_\_\_\_ We will sign and abide by the Zoo's Hold Harmless Agreement.

\_\_\_\_ We can provide a certificate of insurance for the noted insurance requirements outlined in the Guidelines.

**Please Submit completed form to:** [Cynthia.Condit@toledozoo.org](mailto:Cynthia.Condit@toledozoo.org), fax to 419-724-0066 or mail to P.O. Box 140130, Toledo, OH 43614 Attn: Marketing & Public Relations Coordinator