

## Photographer/Videographer Agreement

Call: 715-261-6309	Mail: 518 South 7 <sup>th</sup> Avenue,	, Wausau, WI 54401	Email: info@monkgardens.org
Name of Company _			
Authorized Represe	ntative		
Address			
			Zip
Phone		Email	
	r permit (We have en Permit to be used on: Date		and understand that the permit is only Time
	tional hours permit (We have nour base permit.) Number of		additional hour ( or portion thereof) uested:

## **Terms and Conditions**

- 1. We understand that Monk Botanical Gardens will issue a duplicate copy of this contract as confirmation once the fee has been received.
- 2. By signing this agreement, we acknowledge that we have read the conditions below, and we agree to abide by them. We agree to indemnify and hold harmless the Robert W. Monk Gardens, Inc., its officers, agents, employees and volunteers against any and all loss, damage, claim or liability, whether for personal injury or property damages caused by or arising from the actions of the applicant, its guests and customers.
- 3. Proper photo credit must be awarded. "Location: The Monk Gardens, Wausau, WI"

## **Conditions:**

- Do not pick the flowers or rearrange plant foliage for any purpose.
- Do not block the pathways, especially when photographing groups.
- Do not hang clothes, backdrops or other props on plants and trees.
- Do not remove plant labels for any reason.
- Do not bring in any alcoholic beverages.
- Stay on the pathways or mowed areas at all times, keeping equipment and people out of flower beds.
- Pets must be kept on a leash. Pick up after your pets to prevent them from damaging trees, shrubs and flowers.
- Buildings, except bathrooms, may not be used as dressing rooms and must remain open to the public.
- For your own protection, do not leave equipment unattended.

Authorized Representative Signature:	_ Date:
Monk Botanical Gardens Representative:	_ Date:

 Amount Received: \$\_\_\_\_\_
 Make check payable to: Monk Botanical Gardens