

Christ's College Cambridge

PERMISSION TO FILM REQUEST

Name:	
Company:	
Address:	
E-Mail:	
Purpose for w	hich you wish to film/record (name of broadcaster if applicable):
Exact time and	date you wish to film/record:
Nature of film/	recording (i.e.: which locations, buildings, people, etc.):
Date of propos	ed broadcast/publication:

The College will grant permission for filming or recording within the College grounds on the following conditions:

- 1. That the usual acknowledgement, "By kind permission of the Master and Fellows of Christ's College, Cambridge", is made.
- 2. That an undertaking is given not to reproduce the film or recording, or permit it to be reproduced, for any purpose whatsoever, except that for which permission is granted.
- 3. That a copy of any film or recording taken is made available to the College for its own use.
- 4. That any charge levied by the College for filming is paid on request.

Further		s ference or disruption in the life of the College e College Porters and Custodians at all times
aa ta ba	Charand.	Yes □ No □
	Charged: ble a facilities fee will be charged as follows:	163 🗀 110 🗀
	o and including the first two hours of filming/re	ecording and £150 per hour thereafter.
	willing to accept these conditions, will you plead blege, Cambridge, CB2 3BU – director.services(ase complete this application form and return it to: The Director of College Services, <u>@christs.cam.ac.uk</u>
f permiss	ion is granted I agree to abide by the above co	onditions.
gned:		Date:
sition:		_
rmissior	n Granted:	
gned: _		Date:
,	Fellow on behalf of Christ's College	
		place within the College grounds until you receive a copy of this form signed by,
		Revised: February, 2