

**APPLICATION FOR AUTHORISATION TO PHOTOGRAPH/FILM BLUEWATERS'
PUBLIC AREAS**

**Please note that photography of storefronts and interiors is strictly prohibited
without consent of the individual store**

Photography of other guests is prohibited without consent

NAME: _____ DATE REQUEST MADE: _____

COMPANY/ORGANISATION: _____

PHONE NUMBER: _____

FAX NUMBER: _____

DATE AND TIME REQUESTED TO PHOTOGRAPH/FILM: _____

PLEASE LIST ALL EQUIPMENT (EXCLUDING CAMERAS) THAT WILL BE USED: _____

PLEASE LIST ALL MEMBERS OF THE CREW PRESENT: _____

WHAT IS THE PURPOSE OF THE PHOTOGRAPHY/FILMING (please provide a detailed description):

PLEASE LIST AREAS WITHIN BLUEWATER THAT WILL BE COVERED IN THE PHOTOGRAPHY/FILMING:

PLEASE LIST THE DATES OF PUBLICATION OR BROADCAST IF KNOWN: _____

PLEASE ALLOW ONE WEEK FOR YOUR REQUEST TO BE PROCESSED AND ENSURE YOU HAVE READ THE TERMS AND CONDITIONS.

I AGREE TO COMPLY WITH BLUEWATER'S TERMS AND CONDITIONS (Please sign): _____

For office use only:

AUTHORISED BY: _____

POSITION: _____

SPECIAL CONDITIONS: _____

SIGNATURE: _____ DATE: _____



