



Photography & Filmography Session Request Form

PLEASE PRINT LEGIBLY

EMAIL COMPLETED FORM TO: MCP-AHFPprograms@montgomeryparks.org

Active Montgomery Account Information

If you already have an account with Active Montgomery, please use the email associated with your account.

If you do not have an account, we will create it for you.

FIRST NAME _____ LAST NAME _____ BIRTHDATE _____

BUSINESS/ORGANIZATION NAME (if applicable) _____

STREET ADDRESS _____ CITY _____ STATE _____ ZIPCODE _____

EMAIL _____

PRIMARY PHONE _____ SECONDARY PHONE _____

Photo/Film Session Details Please be as specific as possible, so that we can try to accommodate your needs.

PHOTO SESSION DATE REQUESTED _____ START TIME _____ END TIME _____ TOTAL HOURS _____

ALTERNATIVE SESSION DATE REQUESTED _____ START TIME _____ END TIME _____ TOTAL HOURS _____

SPECIFIC AREA TO BE USED _____

TOTAL # PEOPLE IN GROUP (Including photographer, assistants, participants, and bystanders): _____

TOTAL # VEHICLES EXPECTED _____ PLEASE LIST ANY LARGE VEHICLES _____

Please check all that apply:

- Someone in the group is wearing a wedding or Quinceanera dress
- Someone in the group is wearing formal attire (dress/suit/tuxedo)
- We require a place to change clothes or plan to bring costume changes
- We will arrive in a limo/party bus/large transport vehicle

STAFF USE ONLY

DATE RECEIVED _____ DATE APPROVED _____ PERMIT CONTRACT TITLE _____ PERMIT # _____

Permit Contract created/date emailed **with Terms of Use** _____ Payment Received on _____

Confirmation of Payment email sent _____ Permit copy filed _____