

Photography & Filmography Session Request Form PLEASE PRINT LEGIBLY

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 one for you.

FIRST NAME	LAST NAME	BIRTHDATE		
BUSINESS/ORGANIZATION NAME (i	f applicable)			
STREET ADDRESS	CITY	STATE	ZIPCODE	
EMAIL				
PRIMARY PHONE	SE	SECONDARY PHONE		
Photo/Film Session Details	Please be as specific as possil	ble, so that we can try to accom	modate your needs.	
PHOTO SESSION DATE REQUESTED	START TIME	E END TIME	TOTAL HOURS	
ALTERNATIVE SESSION DATE REQU	ESTED START TIME	E END TIME	TOTAL HOURS	
SPECIFIC PARK AREA(S) TO BE USED	(Historic buildings area, park	grounds, trail, etc.)		
TOTAL # PEOPLE IN GROUP (Including	g photographer, assistants, parti	cipants, and bystanders):		
TOTAL # VEHICLES EXPECTED	PLEASE LIST ANY LARGE	VEHICLES		
PURPOSE OF PHOTO SESSION:				
Please check any that apply:				
We plan to bring cloth	ing/costume changes	We will arrive in a limo or larg	e vehicle	
STAFF USE ONLY				
DATE RECEIVED WMCP S	TAFF APPROVAL	DATE APPROVED		
PERMIT CONTRACT TITLE	PERMIT #			
Permit Contract created/date emailed with Terms of Use		Payment Received on		
Customer Confirmation Fmail sent		Permit copy filed for Visitor Center		