

**FILMING AND PHOTOGRAPHY
IN THE GALLERIES
AGREEMENT and INVOICE**

ALASKA STATE MUSEUM

PO Box 110571, Juneau, AK 99811
Ph: (907) 465-2901 Fax (907) 465-2976
museums.alaska.gov

REQUESTOR'S ADDRESS INFORMATION:

Contact: _____ Title: _____

Address: _____

Telephone: _____ Fax: _____ Email: _____

FILM CREW OR PHOTOGRAPHER'S INFORMATION:

Name: _____ Contact Phone Number During Project: _____

CONDITIONS

- All rights are one time, non-exclusive use per publication or production.
- An Image Use Agreement form must be completed and authorized if specific objects are filmed or photographed.
- The Museum may determine that the proposed project requires working after public hours. A service fee of \$50.00 per hour per employee will be charged for projects completed after public hours. At least 2 museum employees must be present.
- A service fee of \$50.00 per hour may be charged for staff services during public hours.
- **CREDIT LINE:** If the material is published in any manner, a credit line must appear in the final production or product: ***"Filmed or Photographed on location at the Alaska State Museum in Juneau Alaska."*** An additional credit line may be required if a specific object is featured in the film or photograph; see the Image Use Agreement form if this is necessary.
- The photographer is responsible for obtaining written consent from individuals that will be filmed or photographed during the project.
- Authorization will be granted when this agreement is completed and signed by Museum staff and payment is received in full.

DESCRIPTION OF THE PROJECT:

PROJECT DATES: _____

Purpose and intended use of the project:

Intended audience and estimated audience size:

Proposed use of the museum including the desired gallery locations, specific exhibitions, specific objects, and public participation:

Proposed equipment use and technical requirements including tripods, lights, track, power cords, audio recording, HVAC (ventilation) shutdown:

Estimated time to photograph or film:

MUSEUM REQUIREMENTS (to be completed by a museum representative):

Discussed with Curator of Collections Museum Employee overseeing the project: _____
Assistance has been arranged with the following sections: Security Exhibits Conservation Collections

REQUESTOR'S SIGNATURE indicates the requestor agrees to the above conditions.

Requestor's signature _____ Date _____

SERVICE FEES:

Services:	Number of Hours -1/2 hr. min	Number of staff	Fee:	Total:
			\$50.00/hr	\$

PAYMENT IN U.S. CURRENCY:

Method of Payment	Payment Received By:	Date Received:
Make checks payable to the Alaska State Museum		

MUSEUM AUTHORIZATION:

Chief Curator's or Designee's Signature: _____ Date _____