

Filming/Photography Application Form

In order to request permission to film/photograph at one of CHP's sites, please complete this form **and** sign a Filming/Photography Protocol, both of which should then be emailed to info@communityhealthpartnerships.co.uk

More information regarding the application process can be found by viewing the Filming/Photography Process document.

Application form:

CHP building name:	
Name, job title, contact telephone and email address of most senior person who will be on site on the day:	
Project Title: Can be a working title.	
Project Period: Date(s) and Time(s)?	
Purpose of Filming / Photography: Documentary, Feature Film, TV, News, Advertisement, Student Project or Other? <i>(if Other please specify)</i>	
(Production) Company / Organisation name:	
(Production) Company / Organisation telephone, email & address:	

<p>Co-production / On behalf of:</p>	
<p>Has the project been commissioned and if so, by whom?</p>	
<p>On which platforms will the content be broadcasted/published?</p>	
<p>Intended broadcast date:</p>	
<p>Description: What is it that will be filmed / photographed on the premises?</p> <p>Please provide as much detail as possible. Including a description of the scene or scenes to be filmed / photographed; the story / context in which the premises will be shown; the target audience; other filming locations and people being interviewed as part of this project. If you have a specific location please specify, otherwise please give an indication of the type of location you are looking to use.</p>	
<p>Will you need to interview / film / photograph any staff or patients?</p> <p>If yes, please provide details and familiarise yourself with the CHP Consent Forms which will need to be completed by</p>	

the staff or patients prior to being interviewed / filmed / photographed.	
Will you require a site visit in advance?	
Branding, product placements and logos to be included:	
Do you have Public Liability Insurance?	
Equipment / props to be brought onto the premises Please specify the quantity in terms of cameras, lights, sound equipment and other equipment. As well as whether the equipment is mains powered and, if so, the applicable ratings (in watts).	
Specify any other on site requirements Temporary power supplies, parking etc.	
Names of cast: If applicable.	
Names (and roles) of crew who will be on site on the day of filming / photography: If not available now, all names must be provided at least 48 hours before filming / shoot.	

This document is a request to film or take photographs on CHP premises. It does not constitute a filming or location contract nor does it imply permission to film/photograph.

Declaration:

I hereby confirm that, to the best of my knowledge, that the information provided is accurate and true.

Name:

Signed:

Date:

Organisation:

Position: