STATEMENT OF INTENT

I have read and understood the Motion Picture / Video / Photography guidelines and agree to the terms and conditions stated herein. My signature below affirms my authority to make decisions pertaining to the CSULB filming permit on behalf of my company. Furthermore, my signature affirms my intention of filming on the campus of California State University Long Beach. My signature however does not constitute approval of a Motion Picture/ Photography permit but an initial agreement to proceed with the coordination of the permit.

Please fill out the blank spaces below with your most current information.

Name: _____

Title: _____

Company: _____

Signature: _____ Date: _____

PRODUCTION REFERENCE

Production Title: _____

Est. Campus Access Dates: _____ to _____
First arrival on campus Last departure from campus

CREDIT AND CHARACTER REFERENCE

Last Venue/Facility booked: _____

Name of Facility Manager: _____

Phone #: _____

THANK YOU FOR YOUR INTEREST IN CAL STATE LONG BEACH. PLEASE RETURN FAX THIS PAGE AND APPENDICES A, B &C TO
Email: pacc@csulb.edu

We will contact you to schedule a walk-through of your location(s) of interest upon receipt of this page and the following appendices.