USU Campus Recreation Media Request Form (For Official University Business Only)

Name: ____________________________________________________________

Date and Time Requested: __________________________________________

A# if applicable: ___________________________________________________

Phone Number: ____________________________________________________

Email Address: _____________________________________________________

Requested Area(s):

ARC Lobby                                    ARC Courts                             FH First Floor
ARC Weight Room                               ARC Track                             FH 2nd Floor
ARC MAC Gym                                   ARC 2nd Floor Cardio                  HPER Pool(s)
ARC 3rd Floor Loft                            ARC 3rd Floor Cardio                  HPER Courts/Dance Studios
ARC Locomotion Spin Room                     ARC Climbing Wall                     Other: __________________

When taking pictures or shooting video (including video capable cell phones) by individual(s) or the media:

- Prior permission must be obtained from the Director of Campus Recreation or Assistant Director of Facility Operations. **Requests must be submitted a minimum of 48 hours before requested shoot time.**
- All filming and photography must be conducted in a safe manner.
- All filming and photography must be contained within the areas agreed upon. Pictures or videos are not allowed to be taken in the locker rooms & restrooms.
- All filming and photography must not interfere with the normal operation of the facility.
- Patrons privacy and personal space must be respected at all times.
- A charge for any damage to equipment or facilities resulting from the shooting will be assessed to the individual or media organizations.
- Written permission must be obtained from all subjects whose image is captured in the photo/video.

**MUST PRESENT THIS PERMIT TO THE FACILITY SUPERVISOR ON DUTY BEFORE FILMING**

Violation of any of the above guidelines can result in a permanent ban for future filming or possible disciplinary actions including loss of USU Campus Recreation privileges.

__________________________________________  ____________________________
Requestor’s Printed Name                    Requestor’s Signature

__________________________________________  ____________________________
Campus Recreation Staff Member              Date