

## AUTHORIZATION FOR USE OF LIBRARY FACILITY FOR PHOTOGRAPHY/FILMING

Project Description:	
Date & Time of Session:	
Location in Library for filming:	
Number of People at Library:	
Description & Amount of Equipment/Baggage being bro	ought into Library:
I hereby covenant, waive, release and hold harmless and (hereinafter referred to as "Library"), its trustees, agent and all claims and losses arising from the use of the library videotapings included in any media, broadcast, distributed executed as a result of duress, undue influence, or misroits trustees, agents, employees, servants, or anyone actionand is freely agreed to consideration of the Library gramphotography/filming.	ts, servants and/or employees from any rary building in photography or ution, etc. This agreement is not being epresentation on the part of the Library or any on its behalf, its assigns or successors
Signature of Photographer/Filmographer	Date
Print Name	
Address	
Once filled out, return form to Administration for approach Sayville, NY 11782 or FAX to 631-244-0045.	oval at Sayville Library, 88 Greene Avenue,
Library Director	Date