

Group Photography Agreement



Fax or Mail Completed Form to Sales & Rental Coordinator		A PERENNIAL ADVENTURE...	
Call: (920) 491-3691 ext. 113	Fax: (920) 490-9461	Mail: 2600 Larsen Road, Green Bay, WI 54303	

Contact(s) _____
Authorized Representative _____
Mailing Address _____
City _____ State _____ Zip _____
Phone _____ Email _____

Photography Session Information

Date _____ Time _____ # of Guests _____
Photographer _____

*25 admissions included; \$3.50/person for each additional admission.

Terms & Conditions

1. We have enclosed a check for \$100 made payable to Green Bay Botanical Garden or provided credit card information.
2. We understand that Green Bay Botanical Garden will issue a duplicate copy of this agreement as confirmation of our reservation once the fee has been received.
3. By signing this agreement, we acknowledge that we have read the Green Bay Botanical Garden Photographer/Videographer Policies. We agree to abide by these conditions. We agree to indemnify and hold harmless Green Bay Botanical Garden, its officers, agents, employees, and volunteers, against any and all loss damage, claim, or liability, whether for personal injury or property damages caused by or arising from the actions of the applicant, its guests and invitees.

Authorized Representative Date

Amber Crisp, Sales & Rental Coordinator Date

Payment

Checks can be made out to: Green Bay Botanical Garden **or** please provide credit card information:

Name as it appears on the card:			
Billing Address:	City	State	Zip Code
Card Type: <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa <input type="checkbox"/> Discover			
Credit Card Number:	Expiration Date:	Three (3) Digit Security Code:	