

Film Permit Application



About Your Production:

Application Date:		Production Dates:				
Start_Time:		End Time:				
Primary Contact & Title:						
Production Title:						
Company Name:						
Address:						
Office Telephone Number:						
Email Address:						
Onsite Contact & Title:						
Onsite Contact Number:						
Location: Agua Caliente Casino Rancho Mirage 32250 Bob Hope Dr., Rancho Mirage, CA 92270 Agua Caliente Casino Palm Springs 401 E. Amado Rd., Palm Springs, CA 92262						
Indian Canyons Golf Resort 1097 E. Murray Canyon Dr., Palm Springs, CA 92264		□ Indian Canyons		Tahquitz Canyon		
□ Other:						
About Your Shoot: (Check all	l that apply.)					
□Still Photography	□Video	□Both				
□Feature Film	ΠTV	□Commercial	□Catalogue		Docum	entary
Educational Project	□Corporate	□Music Video			□Audio	5
Do you plan on having food onsite? □Yes □No		Do you plan on having animals		onsite?	□Yes	□No
Project Summary/Special R deny any application that propos	-					right to

 Vehicles/Equipment: (Please specify the number of each item.)

 □Generators
 □Vehicles
 □Motor Homes
 □Large Vehicles
 □Portable Outhouse
 □Other Vehicles:______

 People Count:
 (How many of each?)

 Other: (Specify)



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Applicant agrees to use reasonable care to prevent damage to Indian property and to remove any and all property which may have been placed upon the premises in connection with use thereof. Applicant agrees to restore said property to its original condition. If this application is approved, the Tribe will give and grant to the applicant the right to photograph said property or part thereof, subject to the conditions that the Tribe may specify, and to exhibit and distribute photographs thereof in connection with such advertising. Whenever possible, the AGUA CALIENTE BAND OF CAHUILLA INDIANS or reservation lands are to receive recognition. If publicized, receipt of copy is mandatory.

Before beginning to film or photograph on the Tribe's property, the applicant will provide to the Tribal Office a certificate of public liability insurance in accordance with the attached Tribal Insurance requirements.

We hereby agree to indemnify the Agua Caliente Band of Cahuilla Indians and hold you harmless from any claims or demands of any person(s) arising out of or based upon personal injuries and/or death suffered by such person(s), resulting directly from any act or negligence on our part while we are on the property for the purpose of photographing or shooting the said project, or are engaged in any activities directly related to such project.

Agreed and Accepted by:_

Applicant/Agent

Date

Contact Information:

Kate Anderson, Director of Public Relations Phone: 760-699-6925 Fax: 760-699-6802

802 Email: kanderson@aguacaliente-nsn.gov

In our ongoing attempt to reduce paper, we prefer to receive Film Permit by email: <u>kanderson@aguacaliente-nsn.gov</u>

FOR OFFICE USE ONLY					
Permit Effective:through					
Approved by: Kate Anderson, Director of Public Relations					
Conditions of Approval/Additional Comments:					
□ Fees Paid □ Certificate of Insurance Submitted					
Reviewed by: On:	Total: \$				