

# APPLICATION FOR STUDENT FILMING

EMAIL THE COMPLETED FORM TO [FILMING@SURREY.CA](mailto:FILMING@SURREY.CA)

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Production Name

School Name

School Phone

Instructor Name:

Address

City

Postal Code

Student Name

Email

Student Cell

LOCATION (1)

Dates of Prep/Filming/Wrap

Time:

Scene Details

LOCATION (2)

Dates of Prep/Filming/Wrap

Time:

Scene Details

LOCATION (3)

Dates of Prep/Filming/Wrap

Time:

Scene Details

LOCATION (4)

Dates of Prep/Filming/Wrap

Time:

Scene Details

Animals, firearms, special effects or unusual scenes:

Number and type of vehicles

# in cast & crew

City Employees Required (specify)

Please email [filming@surrey.ca](mailto:filming@surrey.ca) with your desired parking location

We, the undersigned, take full responsibility for the actions of all cast and crew and any ramifications resulting directly or indirectly from our filming activity. We also agree to abide by the conditions of this application and all city rules and by-laws.

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Date

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Signature of Student

Except to the sole negligence or willful misconduct of the City of Surrey or its servants or employees, the applicant agrees to indemnify and save harmless the City of Surrey, its elected and appointed officers, agents, servants, and employees from and against all liability, claims, damages, losses, costs, actions, causes of actions, suits, proceedings expenses and demands of every kind, description, and nature whatsoever, including legal fees and disbursements, arising out of or in any way connected with the issuance of this permit or with the use of City of Surrey properties pursuant to this agreement.

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Date

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Signature of Instructor as School Representative