

Filming Request Application Form

Please be advised that all relevant details on this document must be completed where applicable as well as providing copies of all supporting documents. Application to be emailed to reception@prestonmarket.com.au

Contact Information

First Name		Last Name:	
Position: <input type="checkbox"/> Producer <input type="checkbox"/> Screenwriter <input type="checkbox"/> Director <input type="checkbox"/> Production Designer			
<input type="checkbox"/> Other _____ (please specify)			
Contact Number:			
Email Address:			

Filming Information

Film Title:	
Brief Description of the film:	
Date/Dates and time you are requesting to film:	
Number of cast members required on site:	
Where will the film be publicised? <input type="checkbox"/> Television <input type="checkbox"/> Social Media <input type="checkbox"/> Ad Campaign	
<input type="checkbox"/> Other _____ (Please specify)	
Is the on the day contact person the same as the above contact information? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<i>If no, please complete details below.</i>	
First Name	Last Name:
Position: <input type="checkbox"/> Producer <input type="checkbox"/> Screenwriter <input type="checkbox"/> Director <input type="checkbox"/> Production Designer	
<input type="checkbox"/> Other _____ (please specify)	
Contact Number:	

Preston Market

2/30A The Centreway | PO Box 134 Preston VIC 3072
P: 03 9478 3130 | F: 03 9470 5858

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Required Documents

If approved, we require a copy of the following documents prior to commencement:

- Public Liability Insurance – minimum of \$20,000,000.00 coverage amount
- A copy of your Covid Safe Plan

If you are intending to include members of the public in your film, please ensure you have them sign a talent release form. We will require copies of these to keep on file.

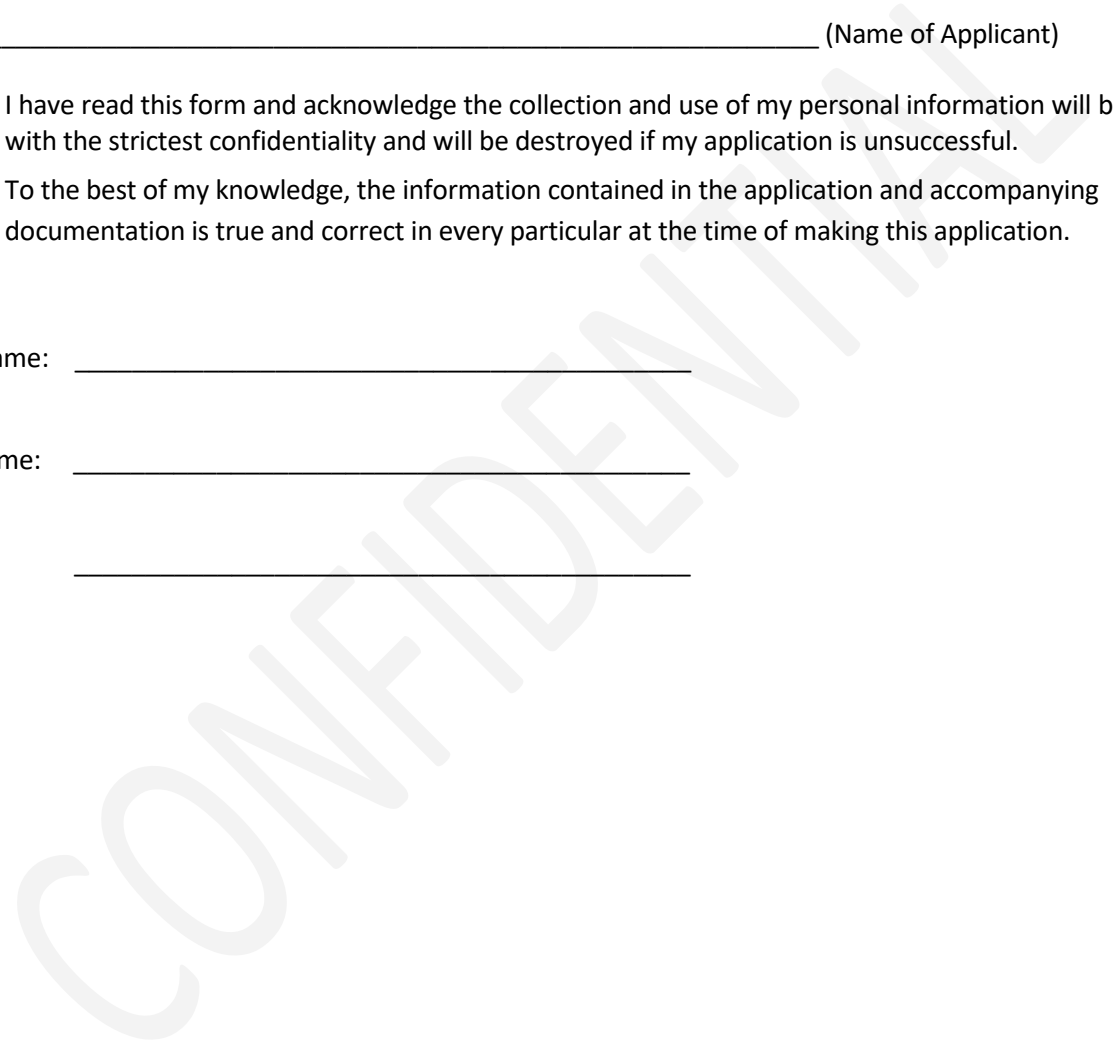
I, _____ (Name of Applicant)

- a. I have read this form and acknowledge the collection and use of my personal information will be treated with the strictest confidentiality and will be destroyed if my application is unsuccessful.
- b. To the best of my knowledge, the information contained in the application and accompanying documentation is true and correct in every particular at the time of making this application.

Print Name: _____

Sign Name: _____

Date: _____



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