



Business Video Services

Location Information:

Business or Location Name: _____ Number: _____

Address: _____ State: _____ City: _____ Zip: _____

First Shooting Date: _____ Start & End Times: _____

Who obtained permission from the location where we'll be videoing? Indicate Person Responsible for Location Approval below:

Person Responsible for Location Approval Full Name: _____ Company: _____

Number(s): _____ Email: _____

Address: _____ State: _____ City: _____ Zip: _____

Person Responsible for Location Approval Name Printed Signature Date

Select the type of video(s) you need:

Please check which of the following applies:

- Commercials
- Training Videos
- Product Overview Videos
- Website Videos
- I do not have a script, just shoot it the way you want
- I have a script
- I don't have one yet but plan on creating on soon
- I want a script and need assistance with creating one

Will you assign someone to direct the shoot to ensure everything you want covered is going to be covered? If so, who?

Name: _____ Number: _____ Email: _____

If applicable, who'll secure everything needed (locations, actors, etc...) in advance & ensure everything is ready the shoot day?

Name: _____ Number: _____ Email: _____

Check all that apply in relation to the audio:

What will you want the video rendered for? Check all that apply:

- Narration during the shoot
- Narration after the shoot
- Soundtrack needed
- No music or narration needed
- Broadcast
- Internet
- DVD (provided by customer)
- Blu-ray (provided by customer)
- YouTube
- Other: _____

What information if any would you like to have for title pages (titles, lower thirds, credits, etc...)

Person completing this form:

Full name printed: _____ Signed: _____ Date: _____