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BECA LOCATION RELEASE

Date:

Title of Program:

Description of Premises:

Shooting Date(s):

For good and valuable consideration, receipt of which is hereby acknowledged, I hereby agree that representatives of the Broadcast & Electronic Communication Arts Department ("BECA"), San Francisco State University ("SFSU") and all production equipment required by SFSU representatives may be in and around the Premises on the above Shooting Date(s) for the purpose of recording (by tape, film or otherwise) the Premises in connection with the Program. I agree that the BECA Department may incorporate such recordings, in whole or in part, into the Program. The foregoing shall include the right to use likenesses of the Premises for Program packaging, promotion and publicity purposes. I represent and warrant that I have the legal right and power to grant to the BECA Department, San Francisco State University, the rights granted above.

Name:

Signature:

Address:

Phone:

Email:

THE CALIFORNIA STATE UNIVERSITY: Bakersfield, Channel Islands, Chico, Dominguez Hills, East Bay, Fresno, Fullerton, Humboldt, Long Beach, Los Angeles,