B&J Evergreen Inc.

12946 47th Street Clear Lake MN 55319 320-743-2255

Please complete and email to Kathy	y@bjevergre	en.com	
Photographer/Business Name:			
Address:			
City:			
Phone:			
Email:		_ 	
Circle one:			
Clear Lake Location	Pri	nceton Location	
Date(s) & Time(s)			
Certificate of Insurance em	ailed in wi	ith this form.	
I agree to the following rules and re the purpose of holding a photo sho Evergreen staff that I am on site an I may set up. I will not block roads of set up any props or supplies the da end of the day and remove them. I gated off areas. I will not cut or trin clients locating the photo shoot loc	oot. I will stop ad get any up or impede the y of the shoo will not oper n any trees in	o at the office to inform B&J odated instructions including where he flow of traffic in anyway. I will ot and will take them down at the n or pass through any gates or n any way. The coordination of	е
Photographer's Name (Printed			
Photographer's Signature:		Date:	
I hereby release EClan Inc (dba B&J any liability for injury that I or my c session at the Farm. In case of illness property and in the event that I or the staff members of Sugar Pines Farms or transportation to a hospital for respective staff.	lient(s) may s ss or injury o my client(s) a arm to arran	sustain during my photography occurring on Sugar Pines Farms' are unable to respond, I authorize age emergency medical treatment	
Photographer's Name (Printed	d):		
Photographer's Signature:		Date:	