NAVAJO NATION PARKS AND RECREATION DEPARTMENT

Application for Photography Permit

www.navajonationparks.org



Submit application and applicable fees to the address at each location photography is to take place .

Date:

GENERAL INFORMATION

19 NAVAJO NATION 57

RKS & RECREATION

Applicant/Agent:	Name of Project/Client:	
Company Name:	TYPE OF PROJECT:	
Address:	Freelance	
City/State/Zip:	Educational (Student Photography)	
· · ·	Commericial (For sale or profit)	
Phone #: FAX #:		
e-mail	Non-Profit (ie. 501c. 3 advertising)	
Producer:	Other, Please Explain	
Insurance Co.:		
Federal Tax ID # or Social Security No:		
Photography/Director:		
Summany of Project' (Attach additional pages if pecessary)		

Summary of Project: (Attach additional pages if necessary)

SHOOTING SCHEDULE BY LOCATION: (Select locations that apply)

Date	Location	Times	Address
	Camp Assayi/Bowl Canyon		P.O. Box 2520 Window Rock, AZ 86515 Fax 928-871-6637 geri@navajonationparks
	Canyon de Chelly		P.O. Box 2520 Window Rock, AZ 86515 Fax 928-871-6637 cdc@navajonationparks.org
	Four Corners Monument		P.O. Box 861 Teec Nos Pos, AZ 86514 Fax 928-871-6637 nslim@navajonationparks.org
	Lake Powell Navajo Tribal Park (Antelope Canyon)		P.O. Box 4803 Page, AZ 86040 Fax 928-698-2820 ac@navajonationparks.org
	Little Colorado River Tribal Park		P.O. Box 459 Cameron, AZ 86020 Fax 928-679-2017 lcr@navajonationparks.org
	Monument Valley Navajo Tribal Park		P.O. Box 260289 Monument Valley, UT 84536 Fax 435-727-5875 sc@navajonationparks.org

I hereby state that the above information given is complete and correct, and that no false or misleading information or false statements have been given. All estimates are reliable to the best of my knowledge and I have the full authority to represent the applicant/production company and the project described above.

Signature:

Date:

Park Manager:

Date: