



Application and Registration for Wedding Photographers

Name _____

Name of Business _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____ Email _____

Business website address _____

Please describe the purpose of the photo shoot that you wish to schedule. For example: personal & professional portraits; if photos will be used in a specific publication, please name the publication and approximate printing date; if photos will be used on a website please provide website address.

Photography Fees -- Please select the appropriate payment type and method of payment. Photography fees are valid during the hours the Center is open to the public. **If you plan to shoot before or after hours, there is an additional \$100 per hour fee.**

\$500 Annual Fee _____

\$100 Daily Fee _____

Payment

_____ **Check** _____ **Cash** _____ **Credit Card**

Type of Credit Card: Mastercard American Express VISA

Name as it appears on the card: _____

Credit Card Number _____ Expiration Date: _____ CVV# _____

I hereby authorize the Lady Bird Johnson Wildflower Center to charge my credit card as described above.

Signature

Printed Name

Date

Scheduling Information

Please indicate below the date(s) and time(s) that you would like to schedule a photo shoot.

Please complete and return form along with your payment at least two weeks prior to the shoot date. Fax (512-232-0156) or mail:

**Lady Bird Johnson Wildflower Center
Attn: Events.
4801 La Crosse Avenue
Austin, Texas 78739**

Questions? Please contact the Events Office at 512.232.0164.