



# LIBERTY LOUNGE MEDIA ACCESS FORM

(FOR STUDENTS AND MRU DEPARTMENTS)

Please note that we may require up to 48 hours for approval. Please return to room Z222.

Submission Date: \_\_\_\_\_ Date for approval: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Project name and brief description: \_\_\_\_\_

Time: From: \_\_\_\_\_ To: \_\_\_\_\_

Exact Location: \_\_\_\_\_ Expected Number of People Involved: \_\_\_\_\_

Will you be taking pictures or filming?  Pictures  Filming  Neither

What will this be used for?: \_\_\_\_\_

Do you have the explicit consent of the people being filmed or photographed?  Yes  No

Will this information be used or posted outside of Mount Royal University?  Yes  No

Facility Requirements (e.g. Table/Chairs use, etc.): \_\_\_\_\_

Your signature: \_\_\_\_\_

I have read and understand the policies outlined in the SAMRU Media Access Plan and agree to the notes listed below  Yes  No

**Please note the following:**

- Drink labels cannot be shown in any pictures or videos.
- AT NO TIME can people consuming alcohol be filmed.
- We would appreciate a copy of your photo, video or final project when it is completed.
- The number of people/media outlets accessing the Liberty Lounge or SAMRU events at one time may be limited.
- Approval is dependent on availability of space and resources and compliance with SAMRU policies and provincial and federal laws and regulations.

**Privacy:** The personal information collected on this form will be used to administer and manage Students' Association programs and services, and to maintain the Students' Association's records. This information will be protected by the provisions of the *Personal Information and Protection Act* and can be reviewed during normal business hours upon request. Information may be disclosed to third parties in order to meet specific contractual and legislative requirements required to deliver services you have requested. We treat your personal information with care and respect, and use it to improve our services to you.

**FOR OFFICE USE ONLY:**

Approved By: \_\_\_\_\_ Date: \_\_\_\_\_  
*Executive Member or Executive Director*

Comments: \_\_\_\_\_  
\_\_\_\_\_