

## Webster Township Historical Society

PO Box 253  
Dexter, MI 48130

wthsmi@gmail.com  
WebsterTownshipHistoricalSociety.org

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### COMMERCIAL PHOTOGRAPHY PERMIT AGREEMENT

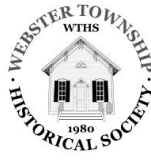
The Webster Township Historical Society (WTHS) is a non-profit organization dedicated to preserving the landscape and historic structures built by early residents of Webster Township. All fees collected ensure the site remains one of Webster Township's most picturesque locations. Thank you for your support.

#### TERMS AND CONDITIONS OF USE

Those interested in shooting on location at WTHS and Historic Webster Village (HWV) may do so by adhering to the following conditions.

- All sessions must be scheduled in advance; call 734-726-5058 (messages are welcome and will be answered as soon as possible) or email WTHSmi@gmail.com
- Photographic sessions must take place between 9:00am and dusk EST/EDT. Access to the grounds is not permitted before or after these hours.
- Photographers and their party must check in at the Crossroads Community Center to receive their badge. Access badge will remain with the photographer and visible for the duration of the shoot.
- The photographer assumes full responsibility for the conduct of all persons in their party for any damage to any part of the site. The photographer agrees to pay for any damage that occurs during the session.
  - Refrain from damaging our buildings. Climbing on or swinging from any part of a building is strictly prohibited.
  - Refrain from damaging our grounds. Do not pick, cut, trim, or injure plants, flowers, trees or shrubs. Climbing on trees or fences is strictly prohibited.
- The log cabin next to our grounds is NOT WTHS property and may not be used for photography.
- Do not obstruct visitor walkways.
- Props and backdrops must be freestanding and not attached to any structures.
- Candles and open flames are not permitted on the grounds or in our buildings.
- Alcohol is prohibited.
- Any personal property brought onto the premises shall be at the sole risk of the photographer and WTHS shall not be liable for any loss or damage.
- Parking is restricted to the Crossroads Community Center or the north township public parking lot.
- WTHS reserves the right to deny a photographer permission to use our facilities or terminate a photographer's activity at any time for failure to comply with these terms.

**Crossroads Community Center and  
Historic Webster Village**



**Location:** 5501 Webster Church Road *and*  
5583 Webster Church Road  
Dexter, MI 48130  
WTHSmi@gmail.com  
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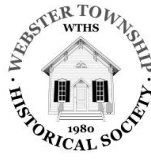
- Those using the WTHS facilities agree to release, protect, defend, indemnify and hold harmless the WTHS and its officers, board members, members, and other representatives from and against any and all claims, liabilities, losses, damages, actions, costs and expenses (including, without limitation, reasonable attorney’s fees and other legal costs) arising directly or indirectly from their use of any WTHS facilities.

**USAGE FEES**

Fees are in effect as of 5/1/2023 and are subject to change.

<b>Grounds Use <i>only</i> :</b>	<b>Member</b>	<b>Nonmember</b>
2-Hour Session .....	\$50.....	\$65
Daily .....	\$100.....	\$125
Annual .....	\$400.....	\$500
 <b>Building Use <i>only</i>:</b>		
2-Hour Session.....	\$75.....	\$90
Daily .....	\$125.....	\$140
Annual .....	\$500.....	\$550
 <b>Grounds + Building</b>		
2-Hour Session.....	\$125.....	\$155
Daily .....	\$225.....	\$265
Annual .....	\$600.....	\$750

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## COMMERCIAL PHOTOGRAPHY PERMIT

Name of Photographer/Company: \_\_\_\_\_

Date(s) of Photo Session(s): \_\_\_\_\_

Time(s) of Photo Session(s): \_\_\_\_\_ -- \_\_\_\_\_

Contact Person: \_\_\_\_\_

Contact Phone: \_\_\_\_\_ Contact Email Address: \_\_\_\_\_

Contact Address: \_\_\_\_\_

Onsite Contact Person *During* Photoshoot \_\_\_\_\_

Onsite Contact Phone: \_\_\_\_\_

Grounds Being Reserved:  Yes  No

Building(s) Being Reserved:

- Crossroads Community Center
- Old Town Hall
- Podunk School
- Dieterle's Corncrib
- May Mast's Barn
- Kleinschmidt General Store
- Wheeler Blacksmith Shop

Rental Fee(s): \$ \_\_\_\_\_  
Less 10% for WTHS Member \$ \_\_\_\_\_  
Total Amount Due \$ \_\_\_\_\_

Payment Method:

Cash  Check # \_\_\_\_\_  Visa  Mastercard  Discover

Account #: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Billing address:  Same as above.

\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_

**The above-named individual** representing himself/herself, a group, or an organization acknowledges receipt of this Commercial Photography Permit Agreement and has read, fully understands, and agrees to all provisions set forth in said agreement and such additional requirements or restrictions as may be communicated on behalf of the WTHS to the individual, group, or organization in the course of said usage.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Printed name: \_\_\_\_\_

Title: \_\_\_\_\_

### WTHS Facilitator:

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Printed name: \_\_\_\_\_

Title: \_\_\_\_\_ Contact Phone: \_\_\_\_\_