



Concord Community TV Program Scheduling Form

Please fill out both sides of this form.

Date: ____/____/____

Your Name (not your organization): _____

Are you a representative of: The Concord School District The City of Concord

Program Title: _____

Please check one: Producer Local Sponsor

Do not play my program after (optional): ____/____/____

Total Running Time: ____:____:____ (From the first frame of disclaimer to the last frame of show)

Please notify me of the play times: email _____ or phone _____

Category:

- Arts/Entertainment
- Children
- Educational
- Election/Candidate
- Ethnic
- Health
- Public Affairs
- PSA/Promo
- Religious/Spiritual
- Sports

Format:

- VHS
- SVHS
- DVD
- MiniDV
- Other _____

After my program is done airing:

- Call me to pick up my show
- Reuse or recycle my tape

Program Type: (Ask CCTV staff if you aren't sure which type your program is.)

- Regular: A program that is scheduled on the channel and saved in our library for subsequent plays when available, if appropriate.
- Series: A series of programs that have a regular schedule that's been approved by CCTV staff.
- Fill: A fill program is a short program under 20 minutes that is added to our fill library and used to fill time in between shows.
- PSA: A non profit public service announcement.

Producer Agreement and Indemnification

I, _____, as producer of the program titled _____, accept full responsibility for program
(Full Name) (Title of Show)

content for cablecast on Public Access Television. I agree to indemnify and hold harmless CCTV, its officers, directors, employees, and agents and participating school districts from liability or legal fees and expenses incurred as a result of cablecasting this program. I warrant and represent that the program does not contain:

1. Any solicitation of funds or material designed to promote the sale of commercial products or services;
2. Any solicitation of funds by individuals;
3. Any material that is obscene, indecent, or an invasion of privacy;
4. Any material promoting a lottery, gift, or similar enterprises;
5. Any material requiring union, residual or other payment including, but not limited to, talent and crew unless those payments have been waived;
6. Any material that is defamatory or contrary to any existing law;
7. Any material that is copyrighted or subject to ownership or royalty rights without necessary releases, licenses, or other permission.

(Refer to Policies and Procedures Chapter XI, B)

Upon request, I agree to provide CCTV with copies of any releases, licenses, or other permissions as set forth in paragraph 7 above, obtained by me with respect to the program. I also agree to secure all proper performance and location releases.

Further, I agree to release CCTV and the PEG Center Coordinator from responsibility if the program is lost, damaged, or stolen while in their custody.

1. I understand the following, no program produced with CCTV facilities or equipment may be used for fundraising or as a revenue generating product without prior approval of the Executive Director.
2. CCTV reserves the right to seek underwriting/sponsorship, and collect funds for such, for any programming produced and cablecast at CCTV facilities. Any acknowledgment of underwriters/sponsors must be prepared by staff only.
3. Programs produced and cablecast with CCTV facilities or equipment may not be used for sale or profit.

Producer signature _____ Date _____

Address _____

PEG Center Coordinator _____

Staff only area:

Scheduled on: _____ Notified of airtimes: _____