

WYANDOTTE
MUNICIPAL SERVICES
COMMUNITY PROGRAMMING

**APPLICATION FOR UTILIZATION OF THE PRODUCTION
FACILITIES AND CHANNELS**

APPLICANTS NAME: _____

ADDRESS: _____

CITY/STATE: _____

TELEPHONE #: _____

REPRESENTED ORGANIZATION: _____

ADDRESS: _____

TELEPHONE #: _____

PROGRAM TITLE: _____

PROGRAM TOPIC: _____

PROGRAM LENGTH: _____ **PROGRAM FORMAT:** _____

PROGRAM OWNERSHIP individual or entity to which ownership of the program and its contents shall be credited:

Applicant states that he/she has read and understands the Wyandotte Municipal Services Community Programming Application Guidelines governing the use of its channels. Applicant agrees to abide by each and every term and condition contained and accepts all legal responsibility and liability for failure to do so.

APPLICANTS SIGNATURE: _____

DATE: _____

WYANDOTTE MUNICIPAL SERVICES USE ONLY

STUDIO PROGRAM DIRECTORS APPROVAL: _____

DATE: _____

COMMENTS: _____

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WYANDOTTE MUNICIPAL SERVICES
COMMUNITY PROGRAMMING APPLICATION GUIDELINES

Applicant recognizes and agrees to abide by the following restrictions:

- 1. Production facilities at the Wyandotte Municipal Services Cable TV Studio are available for the creation of programming designed for local cablecast, and are not available for personal use or personal monetary gain.**
- 2. Applicant recognizes and agrees to abide by the rules and regulations imposed by the FCC and other governmental authorities having regulations regarding the use of the cable access facilities. Wyandotte Municipal Services will have an updated copy of all pertinent rules and policies available for public view.**
- 3. Applicant agrees to make all appropriate arrangements with, and to obtain all clearances from broadcast stations, networks, sponsors, music licensing organizations, performers, representatives, and without limitation from the foregoing, and all other persons as may be necessary to transmit the program material over the Wyandotte Municipal Services Cable TV System.**
- 4. In recognition of the fact that Wyandotte Municipal Services has no control over the content of the access cablecast, the applicant agrees to indemnify and hold the City of Wyandotte and Wyandotte Municipal Services harmless from any and all liability or other injury and damage in law or equity, which claims result from the applicant's use of the access facilities.**
- 5. Applicant recognizes that the Federal Communications Commission requires the Wyandotte Municipal Cable System to maintain available for inspection a record of all persons applying for use of the designated access channel and agrees that this application may be used for such a record.**
- 6. Applicant recognizes that he/she is the sole representative for the above proposed program. Only this applicant will be acknowledged as the liaison for communication and/or proceedings between the proposed program and Wyandotte Municipal Services.**

A complete comprehensive set of rules & regulations are available upon request.

Please retain this form for your records.