



Program Cablecast Request

Name: _____	Daytime Phone: _____
Address: _____	Home Phone: _____
City: _____	Email: _____
State: _____ Zip: _____	

I agree to indemnify and hold harmless both CTSB and Charter Communications (Spectrum) against any claims arising out of any program or program material produced and/or cablecast including but not limited to claims in the nature of libel, slander, invasion of privacy or publicity rights, non-compliance with applicable laws, license fees and unauthorized use of copyrighted material.

I agree not to produce and/or cablecast any programming for airtime on the access channel from which any party derives revenue, and programming the purpose of which is to conduct trade or commerce. (This stipulation does not include programming supported by underwriting grants or contributions of any kind, or programming supportive of CTSB *Operating Rules and Procedures*, as amended from time to time.

I understand that my request for airtime on the access channel will be handled on a first-come first-served, non-discriminatory basis. I understand that the day and time slot I requested for the airing of my program is merely a suggestion, and that CTSB makes the final decision on the scheduling of programs. Further, that the producer of a series of programs does not "own" a time slot, regardless of how long the program has aired in that slot. I understand that CTSB is not obligated to air any programming produced outside the service area of Great Barrington, Lee, Lenox, Sheffield, and Stockbridge.

Signature: _____ **Date:** _____

Program Title: _____
Description of Episode: _____
Desired Time Slot/Week(s) of Play: _____
Date of Production: _____
Total Run Time: _____
Location of Production: _____ CTSB Service Area _____ Berkshire County _____ Outside
Type of Program: _____ Single Program _____ Series of Programs