

PRODUCTION AGREEMENT

PRODUCTION INFORMATION

Producer	<input type="text"/>		
Organization	<input type="text"/>	<input type="checkbox"/>	Non-Profit
Show Name	<input type="text"/>		
Description	<input type="text"/>		
Duration	<input type="text"/>	<input type="checkbox"/>	Single
Series	<input type="checkbox"/> Weekly	<input type="checkbox"/> Bi-Monthly	<input type="checkbox"/> Monthly
Type	<input type="checkbox"/> Public	<input type="checkbox"/> Education	<input type="checkbox"/> Gov
Category	<input type="text"/>		
Budget	<input type="text"/>	<input type="checkbox"/>	Commerical
Start Date	<input type="text"/>	Time Slot	<input type="text"/>
Notes	<input type="text"/>		

I have read the CHANNEL 32 operating rules, policies and procedures and agree to comply with said and any regulations promulgated pursuant thereto. I understand that a completed Access Application must be submitted to, or be on file with, CHANNEL 32 prior to any use of the CHANNEL 32 Access Facilities or the broadcasting of any Access Programming.

Name

Signed Date



Channel 32 - CFSO TV

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