



# WHITMAN HANSON COMMUNITY ACCESS

## Broadcast REQUEST FORM

All shows airing on WHCA are required to ultimately fall under the supervision of one person. This person is called the program's "producer". The following information is required prior to the broadcast of your program.

<b>Program Title</b>	
<b>Program Description</b> (for publicity purposes)	<hr/> <hr/> <hr/> <hr/> <hr/> <hr/>

<b>Producer Name:</b>			
<b>Website:</b>			
<b>Street Address:</b>			
<b>City:</b>		<b>State:</b>	
		<b>Zip:</b>	
<b>Primary Phone #:</b>	Home <input type="checkbox"/> Cell <input type="checkbox"/>	<b>Secondary Phone #:</b>	Home <input type="checkbox"/> Cell <input type="checkbox"/>
<b>Email Address:</b>			

**Please Initial below:**

- I have read and agree to abide by the WHCA Policies & Procedures.
- I understand that WHCA must receive all requests for cablecast 2 weeks prior to the requested premiere date.
- I understand that programming intended for cablecast is due no less than 2 business days prior to its premiere.
- I understand WHCA reserves the right to modify timeslots & policies as necessary over the course of business.

**Out of Town Programming Only:**

Programs produced outside Whitman/Hanson that wish to appear on WHCA must have a local sponsor.

<b>Location Where Produced</b>				
<b>Sponsor's Name</b>				
<b>Sponsor's Phone #:</b>	Home <input type="checkbox"/> Cell <input type="checkbox"/>	<b>Secondary Phone #:</b>	Home <input type="checkbox"/> Cell <input type="checkbox"/>	
<b>Sponsor's Email Address:</b>				

**Signature of Producer:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature of Community Sponsor(s) or Parent /Guardian:**

(\*where applicable): \_\_\_\_\_ **Date:** \_\_\_\_\_