

Orange Government Access Television
OGAT
Programming Request Form

Applicant: _____

Organization: _____

Phone: _____ e-mail: _____

Name of Program: _____

Request to Record a Program Date & Time: _____ Location: _____ Check one: <input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor Check one: <input type="checkbox"/> Meeting <input type="checkbox"/> Concert <input type="checkbox"/> Parade <input type="checkbox"/> Ceremony <input type="checkbox"/> Other (please specify) _____ _____ _____	Request to Broadcast a Previously Recorded Program Format: <input type="checkbox"/> DVD <input type="checkbox"/> Flash Drive (MP4) Length of Program (in minutes): _____ Description of Program: _____ _____
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People to be Recognized & Their Positions: _____

Other Information: _____

I understand the OGAT Policies and Procedures and agree that any programming I request to be recorded or submit for broadcast conforms to these policies and procedures. I also understand that this application must be submitted to the OGAT Coordinator at least 30 days prior to the requested recording or broadcast date and that all programming requests are subject to approval by the OGAT Coordinator.

Applicant's Signature: _____

Date: _____

OGAT Coordinator's Approval: _____

Date: _____

THIS FORM MUST BE RETURNED TO THE FIRST SELECTMAN'S OFFICE