

Great Falls Community Television

60 Court Street, Auburn, Maine 04210

Ph: 333-6601 ext.1012 e-mail gfallstv@yahoo.com

SPONSOR APPLICATION

NOTE: This form is to be used for programs that are produced outside the Cities of Lewiston and Auburn and are being sponsored by a resident of the City. Sponsored programs shall provide a local phone number at the end of the program that residents may contact FMI.

Sponsor's Name (Please Print) _____ Today's Date: _____

Me. Drivers License No. _____ Expiration Date: _____

Non-Profit Organization Name (if any) _____

Producer Affiliation (Producers Name) _____

Project Affiliation (Project Name) _____

Program Name: _____

Your e-mail address: (if any) _____

Your Address:

Street City State Zip

Your Telephone Number: (1 Required) (Day) _____ (Eve) _____

I hereby certify that I am a legal resident of the Cities of Lewiston or Auburn and I agree to the use of my name as the sponsor for the above-named program. I further understand I share the liability for program content with the above-named producer and I agree that my name and an L/A local phone number be added for a 15 second period at the end of the program to enable viewers to contact me if they have questions about the program.

Signature