Great Falls TV Community Access *Lewiston / Auburn Community Television* USER APPLICATION, COMPLIANCE, AND CERTIFICATION

- 1. I understand and acknowledge that any program produced by me using Great Falls TV Equipment and/or facilities, or provided by me to GFTV for cablecast must comply with the rules set forth in the GFTV policies manual and specifically must not contain any of the following:
 - Lottery, or information about a lottery, gift enterprises or similar schemes
 - Any solicitation of funds or advertising designed to promote the sale of commercial products or services
 - Any material that violates Town, State, or Federal laws including, but not limited to those relating to sedition, defamation, slander, libel, invasion of privacy, trademark or copyright
 - Obscenity as defined by community standards.
- I assume full responsibility for the content of all program material produced or provided by me and cablecast by GFTV community access and I insure that such material will not violate any rights of any third party.
- **3.** I will obtain in writing any clearances, approvals, and licenses necessary for materials contained in any programs I produce or provide before requesting cable casting dates.
- 4. I indemnify and hold harmless Great Falls TV, the CATV Regulatory Committee, Spectrum Cable, the Cities of Auburn & Lewiston and their respective staffs from any claims arising out of the use of any program material I produce or provide to GFTV for cablecast.
- 5. I understand and agree not to use GFTV equipment and/or facilities to produce or broadcast programs or other materials for financial gain, and that all programming produced with GFTV Access Equipment may only be shown on non-commercial, Public, Educational or Governmental Access channels.
- 6. I understand that the interpretation of these rules shall be at the discretion of the Public Access Director, and that an appeal of said decision may be made to the CATV Regulatory Committee, whose decision shall be final.
- 7. I agree to release GFTV from responsibility if any program material supplied by me is damaged, lost or stolen while in its custody and I agree to pay all costs for repair or replacement of equipment belonging to GFTV or the Cities of Auburn/Lewiston which may be lost, stolen or damaged while it is signed out to me.

Program Title:	Program Length:			
Requested Air Time/Date: (Refer to Po	licy)			
Producer:	Organization:			
Tape Owner:	Return tape to:			
Address:	Town:	Zip:	Phone:	

I hereby acknowledge full responsibility for the total program content of the above-titled program and agree to reimburse GFTV and Spectrum Cable for any copyright liability which they may incur as a result of cable casting this program. I also agree to notify GFTV if the program content is of a mature or adult nature so that it can be scheduled according to the GFTV Policy. I understand that the use of equipment and cablecast services are available only to qualified legal residents of the Cities of Auburn/Lewiston.

I acknowledge by my signature below that I am a legal resident of the Cities of Auburn/Lewiston or that I am representing a qualified non-profit organization.

Signature:	Date:	Witness:	Date:
Parent or guardian if applicant is a m	ninor:		_ Date: