






**Town Square  
Television**

5845 Blaine Avenue  
Inver Grove Heights, MN 55076

Phone: 651-451-7834   

Web: [www.townsquare.tv](http://www.townsquare.tv)

STAFF USE	
Tape # _____	Date _____
Received by _____	

## CABLECAST REQUEST FORM

**Submitter's Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip :** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Program Title:** \_\_\_\_\_ **Length:** hr \_\_\_\_\_ min \_\_\_\_\_ sec \_\_\_\_\_

**Tape Format:**  DV  DVCAM  DVCPro  Mini-DV  SVHS  VHS  3/4"  DVD Video

**Live Program?**  If Checked, Program Date: \_\_\_\_\_ Program Time: \_\_\_\_\_

**Series?**  If Checked, Program #: \_\_\_\_\_ **Stop Date?**  If Checked, final date for playback: \_\_\_\_\_

**I request the playback on:**  Channel 15 (Public)  Channel 16 (Multifaith)

**Permission for Town Square Television to repeat program:**  YES  NO

**Check the following disclaimers that apply to your program:**  May be of questionable technical quality

Has a mature theme  Contains adult language  Depicts violence  No disclaimer necessary

**May we feature your program on our website ([www.townsquare.tv](http://www.townsquare.tv))?**  YES  NO

**Please e-mail a brief description of your program for use on our website to: [mastercontrol@townsquare.tv](mailto:mastercontrol@townsquare.tv)**

### Statement of Responsibilities

I have read, understand and agree to comply with Town Square Television Policies and Procedures.

I accept full responsibility for all program content and for all claims arising out of the cablecasting of any program I am presenting. I agree to indemnify and hold harmless Town Square Television, its directors, officers and staff; NDC4, its Commissioners, officers and staff; and the Cable Company of Northern Dakota County against any such claims arising out of the program I submit or any breach of this statment of compliance.

Furthermore, I understand that I may be subject to federal, state, and local laws regarding libel, slander, obscenity, incitement, indecency, unlawful activities, invasions of privacy, copyright or other similar laws.

**Program Submitted by:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Program Producer (if other than Submitter):** \_\_\_\_\_  
(Please Sign)

**Address:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip :** \_\_\_\_\_ **Email:** \_\_\_\_\_