



Program Proposal

This is the first step to producing a show. All members are welcome to schedule an appointment for further assistance on getting started.

Name _____ Date _____

Dedham Public Television Membership # _____

Name of Organization _____

Address _____

Town/City _____ State _____ Zip code _____

(H) Phone _____ (C) _____ (W) _____

Email _____

Proposed Program:

Title: _____

Single episode: _____ Series: _____

Monthly _____ Weekly _____ Live: _____ Taped: _____

Length: _____

Start Date: _____

Please list all the equipment that may be needed: _____

Intended Audience/Purpose of Program: _____



Please read and then sign

I hereby purpose the above program for the production and cablecast on Dedham Public Television's (DPTV) channels. By signing this agreement, I understand that I am fully responsible for the content produced on this program and hold DPTV, the Town of Dedham, Comcast, Verizon and RCN harmless from any liability, loss or damage that may arise from the production and cablecast of this program. I understand that presentation of the following is prohibited:

- Commercial material
- Obscenity, defamation, invasion of privacy, or copyright violations
- Anything which violates local, state, or federal laws

I plan to receive the appropriate releases for any copyright material used in the program. I have read and agree to abide by the policies of DPTV.

Producer Name (Print)

Producer Signature

Date

DPTV Approval

Date