

**City of Albert Lea Government Channel DVD Submission Form**

I have read and am familiar with and agree to abide by the policies of the City of Albert Lea's Government Access Channel.

I understand that the material I submit will be used for programming on the City of Albert Lea's Government access channel.

Presentation of the following may be prohibited:

- Any commercial or personal advertising or programming.
- Programs which fall below minimum requirements and technical standards for cablecast.
- Programming which does not have proper clearances, releases and other assurances from the party being recorded.
- Programs identified as having material that the law prohibits Albert Lea TV from broadcasting
  
- I understand that I am fully responsible for all programming material submitted.
- I agree to obtain and attach all necessary clearances from all organizations, individuals and groups as may be needed to videotape and/or cablecast material on ALTV.
- I understand that I am responsible for the production and presentations of my programs. I agree to hold harmless the City of Albert Lea and their employees from any liability, loss, claim, cost or damage of any nature whatsoever which may arise by any reason of any claim that any material produced, cablecast or disseminated by me infringes the rights of any person or organization.
- I agree to hold harmless the City of Albert Lea and their employees from damage that may occur to the submitted dvd.

NAME \_\_\_\_\_

SIGNATURE \_\_\_\_\_ Date \_\_\_\_\_

Phone Number (day) \_\_\_\_\_ (evening) \_\_\_\_\_

Program Title \_\_\_\_\_

Topic \_\_\_\_\_ Format \_\_\_\_\_

No. of Sequels \_\_\_\_\_ Frequency \_\_\_\_\_

If submitter is a minor: Name and signature of adult assuming responsibility:

NAME \_\_\_\_\_

SIGNATURE \_\_\_\_\_ Date \_\_\_\_\_

Disposition of Video: Approved – airing \_\_\_\_\_

Denied – explanation \_\_\_\_\_

For more information please call the Public Information Coordinator's office, 507-377-4380.