

### Cablecast Request / Program Submission

By requesting cablecast time, I become a cable access producer and endorse the program(s) & take full responsibility for the content and views expressed therein. This endorsement holds true whether I made the program myself or it was made elsewhere and I wish it to be cablecast locally.

I understand my name will be placed at the end of all programs I request cablecast in a disclaimer. I will be the contact person for all viewer inquiries, comments, or disputes regarding all shows I request cablecast and my name & contact information will be released on request from viewers. I understand WilliNet staff will make scheduling decisions regarding my program(s).

I understand that by requesting my program be shown on public access, I am not being endorsed by the public access station (WilliNet) nor does this connote any editorial decision was made by WilliNet staff & management to let my program on or not. I understand WilliNet is in no way responsible for the content of my programs(s).

I understand it is my responsibility to obtain permission/releases from persons videotaped and to obtain all clearances if using copyrighted material in my program(s) and understand the potential legal consequences if I have not done so. Should I use copyrighted material citing the Fair Use Clause, the interpretation is my own and I understand and accept any potential legal consequences of my decision.

By signing below, I am agreeing to hold harmless WilliNet, its employees, and Board of Directors from any claims resulting from cablecast, liability or responsibility regarding my program(s).

By signing below, I am fully liable for any claims arising out of any program(s) I request cablecast, including but not limited to unauthorized use of copyrighted material, synchronization rights, license fees, libel, slander, obscenity, invasion of privacy or publicity rights, non-compliance with applicable laws, and community standards of decency.

If over 18, this form must be signed by the producer. If under 18, this form must be signed by parent/guardian of the child.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Child's Name (if applicable): \_\_\_\_\_