



WCCA TV 13 415 Main Street Worcester Mass. 01608 www.wccatv.org 508-755-1880

Citizen Sponsored Program Membership Application

Please allow at least 2 weeks to process this request. All tapes must be properly labeled on both front & spine with the name & time of the program.

\$45.00 Membership			
Ck# _____	Amount Paid _____	by Whom _____	Date: _____
MEMBERSHIP FEES ARE NON-REFUNDABLE		DO NOT SUBMIT YOUR MASTER TAPE(S)	

Producer/Presenter Name: _____
 Phone # _____ Email Address _____
 Address: _____

1. Title of Program: _____
 2. Length of Program _____ 30:00 _____ 60:00 _____ 2:00:00

WCCA TV requires the run time of all videos to equal EXACTLY 30:00 or 60:00, etc. This does not include pre roll, which we require at least 10 seconds of black. It is your responsibility to ensure your tape meets the WCCA TV 13 cable cast requirements, as all access stations vary. If meeting the time requirements is beyond your ability at this time, you have the opportunity to ask the staff to add Public Service Announcements to the end of your program(s) to meet proper run times. Please check one.

- ____ Yes, I give WCCA TV permission to add PSA's to the end of my program
 ____ No, I do not give WCCA TV permission. I understand it is my responsibility and if I cannot meet the requirements myself, the program may not be scheduled on WCCA TV

3. Format of your video ____ Super VHS ____ VHS
 4. Category(s) ____ Ethnic ____ Health ____ Cultural ____ News ____ Religious ____ Art
 ____ Family ____ Sports ____ Comedy ____ Educational ____ Seniors ____ Gov'n't
 5. List patrons/underwriters you acknowledge on the video (on the back of the form)

6. Submit a WCCA TV Citizen Program Sponsor Form from a Worcester resident (no PO Boxes) requesting the video(s) to be cable cast on WCCA TV. Be sure the resident puts their address, email address, and telephone number. (form is attached for them to fill out). All program produced outside of WCCA TV must be sponsored by a Worcester resident(s)

7. If you are not the copyright holder of the program, please submit a letter from the copyright holder (the access center is was produced at) which grants WCCA TV full permission to air the program and its content. Does the program need to have a disclaimer at the beginning ____ Yes ____ No

8. Will you be donating the program(s) to the WCCA TV library for future use, at our discretion?
 ____ Yes ____ No If no, you may call 508-755-1880 x 12 one day after the program has aired and let staff know you will be picking up the tape at the front desk . Any tapes not picked up within 14 days, become the property of WCCA TV 13.

9. There is an annual contribution membership fee of \$45.00 that may be paid by you, the producer/presenter or by the Worcester resident.

I, (print your name) _____ accept full responsibility for the above program content and I agree to indemnify and hold harmless WCCA TV, its Board and its affiliates, from all liabilities and legal fees. The above mentioned program does not contain commercial advertising, libelous, slanderous, obscene or pornographic material. The program does not contain any unauthorized use of copyrighted materials, violations of FCC regulations, local, state, or federal laws. I agree to release WCCA TV and their employees and Board from responsibility if this tape is damaged, lost or stolen in their custody. I will not submit master tapes, but a copy of my original(s)>

X _____ Today's Date: _____
 Signature of Producer/Presenter

If you do not fill in all the above information, WCCA TV can accept that you have granted full permission to the Station. Submit tape(s), this form, the Citizen Sponsorship Form and your contribution to Tracy Foley at WCCA TV 13 either by mail or by dropping off. All shows produced outside WCCA TV can air at most, one time per week on Channel 13. Channel time is limited on our existing channel and we are in the process of requesting a second channel so that we may air all Citizen Sponsored Shows more than one time per week. Thank you for your participation with WCCA TV 13.



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Citizen Sponsored Program Membership Application WORCESTER RESIDENT FORM

Name: _____ Date: _____

Residential Address: _____

No post office boxes, please.

Sponsor **must live in Worcester** and must provide WCCA TV with a copy of their license or other proof of residence (utility bill, etc.) Please attach it to this form.

Name of the program you are sponsoring: _____

Briefly explain why you are requesting the above video to be cable cast on WCCA TV:

All Citizen Program Sponsored shows will be cablecast a minimum of one time per week, at the discretion of WCCA . Please contact the Manager of Programming, Tracy Foley, at 508-755-1880 x 10 or tracy@wccatv.org for the date and time of cablecast. All Sponsored Shows are received and processed, first-come, first-serve. WCCA TV is seen in approximately 54,000 households in the city of Worcester, Mass. and is streaming LIVE on the web every day at www.wccatv.com.

Do you have cable service in your home? ___Yes ___No

How did you hear about WCCA TV 13? ___From Watching ___From a friend ___Newspaper
___From a current TV 13 volunteer
___Other _____

x _____
Your Signature

Date: _____

Thank you for your interest and participation with WCCA TV 13.

Executive Director: Mauro DePasquale