



# Application for Series Renewal

Weekly series programming: *3 plays per week (52 shows/yr)*  
 Monthly series programming: *6 plays per month (12 shows/yr)*  
 Bi-Monthly series programming: *6 plays per month (26 shows/yr)*

<b>FOR OFFICE USE ONLY</b>	
Date: _____	Time: _____ am / pm
Accepted by: _____	
Facil _____	Web _____
Ingest _____	Upload _____
08/11/10 Slot: Day _____	Time _____

Has this program been cablecast through another center? **YES**  
**NO**

Would you like Media Bridges to place your program on its internet channel? **YES** **NO**

All programs must be submitted to **Media Bridges, 1100 Race Street** on week before the first scheduled playback for that show.

## Producer Information

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 State/Zip: \_\_\_\_\_  
 Phone: (h) \_\_\_\_\_ (w) \_\_\_\_\_  
 Email: \_\_\_\_\_

Organization: \_\_\_\_\_  
 Org's Address: \_\_\_\_\_  
 State/Zip: \_\_\_\_\_  
 Phone: (main) \_\_\_\_\_ (ext.) \_\_\_\_\_  
 Website: \_\_\_\_\_  
 Neighborhood: \_\_\_\_\_

## Your Production

Program Title: \_\_\_\_\_ Exact Length: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
 Is this program/series locally produced? **YES** **NO**  
 How often will your programs run (circle one)? **WEEKLY** **BI-MONTHLY** **MONTHLY**

Producers may request one playback time when applying for series renewal. Although Media Bridges will try to fill all requests, no requested playback times or channels are guaranteed.

My one requested playback time: Day: \_\_\_\_\_ Time: \_\_\_\_\_ Channel: \_\_\_\_\_

## Program Content

Circle the one category that best describes your program: **RELIGIOUS** **EDUCATIONAL** **OTHER**

Check the one subject that your program is most about:

- |                                       |  |  |                                     |
|---------------------------------------|--|--|-------------------------------------|
| <input type="checkbox"/> Arts/Culture | <input type="checkbox"/> Business/Professional | <input type="checkbox"/> Civics/Politics | <input type="checkbox"/> Government |
| <input type="checkbox"/> Health       | <input type="checkbox"/> Employment            | <input type="checkbox"/> Social Services | <input type="checkbox"/> Music      |
| <input type="checkbox"/> Media        | <input type="checkbox"/> Religion              | <input type="checkbox"/> Schools         |                                     |

A program identified by its producer as "harmful to juveniles" must be preceded by an audio and video parental discretion advisory reading as follows:

**Parental Advisory:** The following access program includes material found by the producer to be harmful to juveniles. Media Bridges reserves the right to schedule all programming in accordance with current policy.

Is the content of your program harmful to juveniles? **YES** **NO**

Producers signing the Statement of Compliance are wholly responsible for program content. Violation of any one or all of the program content prohibitions may result in curtailment of future use of the community facilities and equipment. Media Bridges assumes no liability whatsoever for the content of access programs. Media Bridges shall not exercise control over program content in any manner incompatible with the City of Cincinnati's franchise agreement and 1996 Telecommunications Act. However, all programming submitted for cablecast must contain local content of at least ten (10) seconds in length. Character generated text identifying the local provider's name, address, and telephone number is one means of satisfying this rule. Once signed, Statement of Compliance applies to all the programs within a given series including "live" cablecasts up to the annual September schedule change. However, the producer who signs the Statement of Compliance to cover the series must notify Media Bridges if the program content designation changes for any episode within that series. In addition, if the producer who signed the original Statement of Compliance moves out of the city of Cincinnati or is no longer, for whatever reason, responsible for the program, notification must be provided to Media Bridges. This notification must be in the form of a newly signed Statement of Compliance and should be submitted to Media Bridges' staff at least three (3) weeks prior to the airing of any episode with the changed content or new sponsor designation. Orientation is required for all producers signing the Statement of Compliance prior to the airing of any episode. The producer agrees to release Media Bridges and its affiliates, officers, agents and employees from responsibility if their program is damaged, lost, or stolen while in Media Bridges custody. Producers must preserve a copy of any program which is cablecast through Media Bridges ('live' or taped) for a period of thirty (30) days following the cablecast. A copy of said program must be made available upon request. False or misleading statement(s) made in the Statement of Compliance are grounds for forfeiture of the right to use community production equipment and/or present programming for community cable channels in addition to other remedies in law or equity which may be available to Media Bridges.

### STATEMENT OF COMPLIANCE

The undersigned applicant agrees to accept full responsibility for program content submitted for cablecast. The applicant hereby agrees to indemnify and hold harmless Media Bridges Cincinnati, its affiliates, officers, agents and employees from liability, legal fees and other expenses incurred as a result of cablecasting this message. The applicant recognizes that Media Bridges Cincinnati is to maintain, available for public inspection, a record of all persons applying for use of cable channels and agrees that this application may be used for such records. False or misleading statements made in this application are grounds for forfeitures of the right to use community production equipment and present programming or community messages on community cable access channels plus other remedies in law or equity which may be available to Media Bridges Cincinnati.

This program does not contain any material that is pornographic, obscene, libelous, slanderous, invade personal privacy, or is otherwise illegal according to Federal, State or Local Law. I have read and understand Media Bridges' current Policies & Operating Procedures, and certify that nothing in this program violates any of these policies and procedures.

**Producer Signature** \_\_\_\_\_ **date** \_\_\_\_\_

My signature below verifies that I have read this Statement of Compliance and agree to abide by its terms and that I am currently a resident of the City of Cincinnati.

**Signature of Applicant** \_\_\_\_\_ **date** \_\_\_\_\_

If producer is under the age of 18, a parent or guardian must sign below.

**Parent/Guardian Signature** \_\_\_\_\_ **date** \_\_\_\_\_