

Nevada County Television (NCTV) Program Series Agreement

Date: _____ **Are you a member of NCTV?** ___ Yes ___ No

Program Type: Single Program ___ Series ___ (check one)

Program Producer: _____

Description of Program for TV Guide: _____

_____.

Nevada County Resident Responsible for Content:	Owner of Original Copyright (if different)
Name: _____	Name: _____
Address: _____	Address: _____
City, Zip: _____	City, Zip: _____
Phone number: _____	Phone number: _____
Email: _____	Email: _____

Program/Series Subject: (Underline one)

Animals	Government
Arts	News
Children's	Other
Comedy	Promo
Cultural	PSA
Documentary	Religious
Educational	Science
Environmental	Social Service
Event	Sports, Talk
Fitness	Travel

Television Rating of Program / Series:

- ___ TV-G Suitable for all ages
- ___ TV-PG Un Suitable for young children
- ___ TV-14 Un Suitable for children under 14
- ___ TV-M Un Suitable for children under 17
- ___ No Rating - News, Sports, protected speech

Dated material to play no sooner than:
_____ **No later than:** _____

Have you obtained Underwriting or commercial sponsor?
___ Yes? (if yes, attach form) ___ No?

Is some of each episode produced in Nevada County? ___ Yes ___ No

May NCTV offer dubbing services for this program?
___ Yes ___ No

Is submitter a non-profit or government agency?
___ Yes ___ No

Should we upload your program for on-demand viewing? ___ Yes ___ No

Series Frequency: ___ Daily ___ Weekly Bi-Weekly ___ Monthly ___

How many episodes per year? ___
End date? _____

Length of Scheduled Time Slot:
___ Filler (under 20 minutes)
___ 30 min ___ 60 min ___ Other

Is NCTV Studio required?
___ Yes? ___ No?

If yes, will you need an NCTV crew?
___ Yes? ___ No?

Do you have a certified crew?
___ Yes? ___ No?