

# City of Rialto - Rialto Network



## CABLECAST REQUEST

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

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

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

ORGANIZATION: \_\_\_\_\_

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

Program Description: \_\_\_\_\_

\_\_\_\_\_

Type of Program (check one):  Series  Special Event  Single Show  PSA

Time Slot (check one):  30 minutes  1 Hour  Other Length: \_\_\_\_\_ : \_\_\_\_\_ : \_\_\_\_\_

Rialto Network Preferred Digital Format: 720, 1080, or 4K in .mpg

Check the one Program Category that best describes this program:

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Entertainment | <input type="checkbox"/> Public Affairs/Informational | <input type="checkbox"/> Documentary   |
| <input type="checkbox"/> Religious     | <input type="checkbox"/> Ethnic-Cultural Expression   | <input type="checkbox"/> Educational/  |
| <input type="checkbox"/> Sports        | <input type="checkbox"/> Magazine/Talk Show           | <input type="checkbox"/> Instructional |
| <input type="checkbox"/> Political     | <input type="checkbox"/> Performing Arts              | <input type="checkbox"/> Mature        |
| <input type="checkbox"/> Other: _____  |   |  |

Does this program contain material which may be considered potentially objectionable (i.e. strong language, nudity, graphic violence)?  YES or  NO

If "YES" please explain: \_\_\_\_\_

\_\_\_\_\_

I, the undersigned, understand and agree that I am liable for all program content, and further agree to defend, hold harmless, and indemnify Rialto Network, the Rialto Cable Advisory Commission and the City of Rialto, their officials, management and staff or local cable operators on any and all claims, damages, and costs that arise from the cablecast of this program. In addition, I warrant that this program does not contain:

1. Any advertising or material that promotes a commercial product or service, unless as it pertains to underwriting.
2. Any unlawful use of copyrighted material.
3. Any material that is libelous, slanderous or defaming of character.
4. Any material that is unlawful invasion of privacy.
5. Any material that violated state or federal law relating to obscenity.
6. Any solicitation or appeal for funds.
7. Any material that violates local, state or federal laws

I further warrant that I have read, understand and agree to this contract.

NAME (please print): \_\_\_\_\_

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

The signature of adult assuming liability and financial responsibility, if applicant is under 18 years of age.

\_\_\_\_\_ Date \_\_\_\_\_

**RIALTO NETWORK USE ONLY**

Date received: \_\_\_\_\_ Date Reviewed by Staff: \_\_\_\_\_

Referred to Cable Advisory Commission on \_\_\_\_\_

(Comments from Commission) \_\_\_\_\_

Approved Date: \_\_\_\_\_ Denied Date: \_\_\_\_\_ Staff: \_\_\_\_\_

If approved, cablecast date(s):

Cablecast Time #1 \_\_\_\_\_ Day of the Week: \_\_\_\_\_

Cablecast Time #2 \_\_\_\_\_ Day of the Week: \_\_\_\_\_

Revised 3/19