



Studio Request Form

Organization (if any) _____ Org. Tel: _____

Name of Producer _____ Tel: _____

Email _____

Address _____

City _____ State _____ Zip _____

Local producer (no charge) Organization (charges may apply) Fee for Service (charges apply per quote)

CONTENT – Tell us about your program **ESTIMATED LENGTH:** _____

Program Title: _____

Description (50 words or less): _____

This program is part of a series. Series Name: _____

REQUESTED STUDIO TIME (includes set-up and tear down) **DATE SUBMITTED:** _____

(Please list at least one alternate time and check with UpNorth TV for final schedule)

- 1. Date _____ Time: from _____ to _____
- 2. Date _____ Time: from _____ to _____

Note: The requested times cannot be guaranteed. For exact scheduled time, contact Up North Media Center (Tel: 231-929-4188).

SET AND TECHNICAL REQUIRMENTS (choose all that apply)

- Blue curtain
- White curtain
- Chroma key green wall
- Studio florescent lights (flat even lighting)
- Tungsten field kit individual lights ((heat generating and limited fixtures)
- Track lights (minimal light level-use at own risk)
- Formal arm chairs – (how many?) _____
- Dining chairs – (how many?) _____
- Dining table– (round) _____ Oval (single leaf) _____ Oval (double leaf) _____
- Coffee table (low)
- Desk
- Other table or set piece (describe) _____
- Folding screen

SET AND TECHNICAL REQUIREMENTS (choose all that apply)**continued**

- Back drop graphic(s) (describe) _____
- Flag(s) Michigan ____ U.S. ____
- Podium
- Piano
- Other – (describe) _____
- Rug (describe) _____
- Ficus trees
- Small potted plant
- Video monitor
- Lavalier Mic's– (how many?) _____
- Hand Held Mic's– (how many?) _____
- Instrument Mic's-(how many?) _____
- Wireless Mic's-(how many?) _____
- Audio Reverb unit (control room)
- PC (running TriCaster IVGA applet)
- PC (PowerPoint)
- PC (internet connection)
- PC (internet+Skype)
- Webcam
- TriCaster Virtual Set (describe): _____

Control room crew (check all that apply)

- Director ONLY
- Director/Technical Director
- Remote Camera Operator
- Audio Operator
- Line Producer
- Floor Director/Timer (In-Studio)

NOTES:

UpNorth TV: Statement of Compliance Agreement

PRODUCER RESPONSIBILITY AND LIABILITY – Please read carefully

By submitting media to the *UpNorth Media Center* at LIAA and signing below, you certify the following statements:

1. I have read and am thoroughly familiar with the *Operating Rules for UpNorth Media Center* (available at <http://www.upnorthmedia.org/policies.asp>) all of which are incorporated herein and made a part hereof.
2. I am thoroughly familiar with the contents of the program material to be shown and state that it is consistent with the following:
 - a. Neither a lottery nor lottery information will be cablecast;
 - b. No advertising material designed to promote the sale of commercial products or services will be cablecast;
 - c. No advertising on behalf of declared candidates for public office or political parties. This includes advertising, promoting and/or opposing ballot issues by supporting groups or lobbying organizations;
 - d. All appropriate arrangements and clearances have been obtained from broadcast stations, networks, sponsors, music licensing organizations, performer's representatives and without limitation by the above any and all persons (natural and otherwise) as may be necessary for authorization to transmit the program materials;
 - e. The program materials do not contain obscene material, as determined in a court of competent jurisdiction;
 - f. The program materials do not contain slanderous or libelous materials, or materials that defame or attack individuals.
3. I understand that violation of any of the above may result in imposition of civil (and in some cases criminal) liability.
4. I agree to defend, indemnify, and hold harmless LIAA and Charter Communications, Inc. and their officials, officers, employees and agents from and against all claims, demands, causes of action, liabilities, judgments, costs and expenses (including attorney fees) arising out of the transmission of program materials on the public access channel.

Signature _____ **Date** _____

Print Name _____

Organization (if applicable) _____

Parent or guardian name (if under 18 years of age) _____

User/Guardian Signature _____ **Date** _____

Address _____

Tel _____ **Email** _____

Cancellation

Available UpNorth TV studio time is limited and canceling scheduled studio time may cause inconvenience to others that want to use the facility. Cancellations should be kept to a minimum. A: Producers that repeatedly cancel their scheduled time may lose future studio privileges. B: Cancellation of equipment and facility reservations should be made at least 7 days in advance, except in cases of emergency.

No-Shows on Scheduled Equipment Time

If a producer does not show up within ½ hour of the time of a reservation for equipment or facilities, any waiting, trained individual may use the equipment/or facilities.