



NCTV PRODUCTION PROPOSAL 1.5

Please print unless otherwise indicated. If needed, you may write on the back.

Date:

Working Title:

Producer Name:

Phone:

Email:

Is this a series?

If so, how often will this series air?

Summary of Production:

Please List Additional Approved NCTV Crew:

Estimated Completion Date:

I understand that I am entirely responsible for my production(s). I agree to hold NCTV, its employees and directors harmless from any liability, loss, claim, cost, or damage of any nature which may arise by reason of any claim that any material produced, cablecast, or disseminated by me infringes or violates any rights of any person or organization. My production(s) are in keeping with the rules and regulations of NCTV and will not be used for commercial purposes.

Signature of Producer (If Under 18, Signature of Parent or Guardian):

Date:

Approved By:

Date:

Production Code: