



Live Studio Request

Program To Be Recorded On
DATE: _____
FROM: _____
TO: _____
CHANNEL: _____

All Requests Must Be Made At Least 4 Weeks In Advance

Program Title _____ Live From _____

Producer _____ Phone _____

Description Of Program _____

CREW MEMBERS

(All crew members must be DATV crew certified.)

Director _____ Floor Director _____
 Tech. Dir. _____ Camera _____
 Audio/Video _____ Camera _____
 Graphics _____ Camera _____
 Master Control _____ Guest Coord. _____

Additional Equipment or Special Requests
(Equipment not provided in standard studio configuration)

QTY.	DESCRIPTION	OUT	IN
_____	_____	_____	_____
_____	_____	_____	_____

Time you will arrive to set up: _____
(You cannot use more than 6 hours of studio time per month)

I have read the DATV Rules & Regulations and agree to abide by them. All of my crew members must be certified for their positions. I am responsible for the actions of the performers on my show, my crew and my guests. I will not conduct any activities that may endanger my crew or guests. I am responsible for acquiring all necessary copyright and performance re leases. I must use a DATV tape to record the program and the physical tape remains the property of DATV. I agree to complete my program within 30 days of taping. If the program is not finished the tapes will be erased and reused. I agree to return the studio to its original condition upon completion of my program. Failure to abide by DATV rules will result in loss of studio use privledges.

I am responsible for all studio and control room equipment while I am using the studio. I will immediately replace any equipment that is lost or damaged resulting from but not limited to, misuse, mistreatment, accident, neglect or theft.

Producer _____ Date _____

Program Dir. _____ Date _____

Operations Mgr. _____ Date _____