



## Series Proposal

[NOTE: To apply for a series, all members must pre-pay their membership dues for the upcoming season and pay a Series Proposal application fee. That fee is \$40 for active and \$100 for inactive members. [Inactive members are those whose certifications and paperwork are up to date and who have produced programming in the past calendar year.] Late Series Proposals [submitted past the posted deadline and up to 10 days late] must be accompanied by an additional \$40 late fee.

Series Title: \_\_\_\_\_

For the season that begins on: \_\_\_\_/\_\_\_\_/20\_\_\_\_ and ends on: \_\_\_\_/\_\_\_\_/20\_\_\_\_

Organization Name (if applicable): \_\_\_\_\_

Producer: [Last Name] \_\_\_\_\_ [First Name] \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone number: [Day] \_\_\_\_\_ [Evening] \_\_\_\_\_ E-Mail: \_\_\_\_\_

### Use attached Category Form as reference

Program Category: \_\_\_\_\_ Length [Check one]:  29:00  59:00

Is this series intended for Mature Audiences? [Check one]:  Yes  No

Will a sponsor[s] be involved?  Yes  No [If yes, attach TBCN Sponsorship Disclosure Forms to this proposal.]

Describe your series in 20 words or less for posting on our Community Bulletin Board: \_\_\_\_\_

May copies of your programs be made if requested by the public?  YES  NO  Only with my consent.  
If yes, do you agree to allow monies paid for copies to be received by TBCN?  YES  NO

Will your series air LIVE or be pre-recorded?  LIVE  Pre-recorded

NOTE: Studio and control rooms are reserved for training and live and recorded productions ONLY. Edit suites are reserved for editing. The station is closed to the public on Mondays, Saturdays and Sundays.

### ONLY COMPLETE THE SECTION THAT APPLIES TO YOU

**FOR PRODUCERS OF LIVE PRODUCTIONS,** complete below using the category air times available on the attached. Producers must be checked in at the station no less than 30 minutes prior to airtime or forfeit their airtime. This assures adequate time to produce a quality program or make a substitution, as necessary.

Preference Order	Which studio do you prefer to use?	Which day of the week do you prefer? [Tuesday through Friday only]	What air times do you prefer that match your program category?
My 1 <sup>st</sup> choice			
My 2 <sup>nd</sup> choice			
My 3 <sup>rd</sup> choice			

**FOR PRODUCERS OF PROGRAMS THAT WILL BE PRE-RECORDED IN ONE OF OUR STUDIOS,** complete below. All reservations are for their specified time and are forfeited following a 15-minute grace period.

Preference Order	Which studio do you prefer to use?	Which day of the week do you prefer? [Tuesday through Friday only]	What times do you prefer to use a studio?
My 1 <sup>st</sup> choice			
My 2 <sup>nd</sup> choice			
My 3 <sup>rd</sup> choice			

**FOR PRODUCERS OF PROGRAMS THAT REQUIRE EDITING ONLY**, complete below. Don't forget all reservations are for their specified time and are forfeited following a 15-minute grace period.

Will this series be originally produced by sources outside of Hillsborough County?  Yes  No

Preference Order	Which edit suite do you prefer to use?	Which day of the week do you prefer? [Tuesday through Friday only]	What times do you prefer to use an edit suite?
My 1 <sup>st</sup> choice			
My 2 <sup>nd</sup> choice			
My 3 <sup>rd</sup> choice			

Please read & sign the following agreement:

I certify that the information provided is accurate and understand that making intentional false statements on this or any other TBCN form will result in suspension of my privileges at TBCN. As the producer or bearer of the pre-recorded or live program[s] described on this form, I accept full responsibility for program content submitted for transmission on Tampa Bay Community Network (TBCN) or other retransmission methods. I agree to release TBCN and its employees from responsibility if this or any program is damaged, lost or stolen while in its/their custody. I will abide by the policies and procedures contained in the TBCN Public Access Policy and Procedure Guide ("P&P"), which are subject to change upon reasonable notice during the term of this agreement. I have obtained releases, licenses and other permissions including but not limited to full copyright authorization, with respect to the program[s]. I hereby agree to indemnify and hold harmless The City of Tampa, Hillsborough County, Bright House Networks, LLC, Verizon Florida Inc., Comcast of Florida/Georgia, LLC, Speak Up Tampa Bay Public Access Television, Inc. (d.b.a. Tampa Bay Community Network ("TBCN")) and its/their officers, directors, employees and other agents from liability, damages, and/or expenses, including legal fees, arising out of this proposal, the series itself, any of the programs and/or any other aspect of my relationship with TBCN. I agree that I will not commence arbitration or bring suit against TBCN and/or its officers, directors, employees and other agents, until I have submitted the claim, dispute or complaint for resolution pursuant to the Complaint/Grievance Procedures and Appeal processes set forth in the TBCN P&P and such procedures and processes have been finally and completely concluded.

In the event a grievance, complaint, dispute or controversy between me and TBCN is not finally resolved through the Complaint/Grievance Procedures and Appeal processes set forth in the TBCN P&P, any remaining controversy arising out of, or in connection with any aspect of my relationship with TBCN shall be resolved by binding arbitration in accordance with the then prevailing Commercial Arbitration Rules of the American Arbitration Association. It is understood and agreed that the arbitrator(s) have no power to vary or modify any of the terms of this agreement and their jurisdiction is limited accordingly. Judgment on the award may be entered in any court having jurisdiction. In any dispute, mediation, arbitration, litigation and/or appeal, including without limitation interpretation or enforcement of this agreement and any claim of intentional tort, breach of duty or contract or violation of my rights by TBCN, that arises from any aspect of my relationship with TBCN, the prevailing party or parties shall recover its/their costs, including reasonable attorneys' fees, from the other party or parties. I am aware that the Program Coordinator may preempt either studio time or telecast time when necessary, and that this preemption shall not count as a cancellation or as an incomplete program. I understand that a minimum crew of three is required to use either Studio A or B. As the producer, I certify that all programs produced as part of this series will meet the description I provided in the above proposal. I agree to allow TBCN to refer compliments and complaints to me by providing viewers with my name and phone number upon request.

Furthermore, as the producer or bearer of the pre-recorded or live program described on this form, I understand that I am reserving a studio or an edit suite as applicable and designated above for a 14-week period. I understand that this agreement will not automatically renew. I agree to complete a new program for each of the 14 weeks in the series agreement, and I recognize that this agreement is nullified if I cancel or fail to complete four programs.

Producer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please note that your series agreement will be rejected if this form is not properly completed, signed and dated and/or if your file is not up to date.

**FOR STAFF USE ONLY**

Check	Yes	No	Staff Signature
Is this the most current Series Proposal form?			
Is this form filled out completely and accurately?			
Is this form signed and dated?			
Is the applicant certified in appropriate areas?			
Is the applicant a City of Tampa resident?			
Has applicant signed the latest P&P Receipt/Acknowledgement form?			
Is applicant in "Active" Status?			
Is applicant in "Inactive" Status?			
Has the appropriate application – and any late – fees been paid?			
Is applicant's Member File up to date?			
Has applicant satisfied Community Desk volunteer requirement?			
If applicable, are Sponsorship Disclosure Forms attached to this form?			
Date Application Received: _____			