



Bicycled Tape Request Form:	
Section #1	
Name of Sponsor:	
Address:	
Phone No:	Email Address:
Section #2	
Program Origination:	
Producer:	
Single/Series:	
Format: DVD DV VHS/S-VHS	Total Run Time:
All FCC Standards must be met: All permits, releases and indemnifications must be signed and available.	
Section #3	
Both sponsor and producer understand from reading Quincy Access Television's Policies and Procedures, that bicycled tapes do not necessarily get a regular time slot. They are used as filler to round out programming. Programs produced by members utilizing Quincy Access Television's facilities and equipment take priority.	
Sponsor Signature:	Date:

(Office Use Only)

Policies & Procedures Signed: _____ Releases: _____ Indemnification: _____

Operations Manager Review Date: _____ Completed: _____ Initials: _____

Executive Director Review Date: _____ Completed: _____ Initials: _____

Approved: _____ Not Approved: _____

Reason for not approved: _____

Revised 2.18.09

