



Nā Leo TV
Community Access Television

Staff Use ONLY!
1st Airdate: _____

Playback Request Form for NLTV Producers/ Presenters

- 1. SUBMISSION DATE: _____
- 2. FILE NAME: _____
- 3. PROGRAM TITLE: _____
- 4. EPISODE TITLE: _____
- 5. PROGRAM/EPISODE DESCRIPTION: _____

6. SEARCH KEYWORDS: _____

7. LENGTH: $\frac{\quad}{\text{HR}}$: $\frac{\quad}{\text{MIN}}$: $\frac{\quad}{\text{SEC}}$

8. THIS PROGRAM WAS CREATED: (check ONE)

- Nā Leo - Hilo
- Nā Leo- Kona
- Neighbor Island
- Out-of-State
- Other

9. PROGRAM SUBJECT: (check ONE)

- Arts/Entertainment
- Cultural/Ethnic
- Health/Well Being
- Community Event
- Educational
- Inspirational/Spiritual
- Community Info
- Food
- Issue Oriented
- Religious
- Science/Technology
- Sports
- Other

Video on Demand (VOD)
If you would like this program to be made available via Nā Leo TV's Video on Demand service, please check the box below.

YES

10. **DOES THIS PROGRAM CONTAIN MATURE CONTENT:** Yes No
(Contains graphic violence, sexual content, or profanity. Programs with mature content will be scheduled after midnight.)

11. Check One: ROS(no preference in air date or time)
 I request these air dates/times below:

12. TIME SENSITIVE: (Program must be aired within a specific time frame to be relevant. Program will stop airing after that date.)

No Yes (If yes, give date program should start and stop airing.) ____ / ____ / ____ - ____ / ____ / ____

Name of Producer: (Print) _____ Signature: _____ Date: _____

Mailing Address: _____ City: _____ Zip: _____

Home: _____ Office: _____ Cell: _____ Fax: _____ Email: _____

Representing Organization Name: _____

Copyright Holder: (Print) _____

If you are NOT the Copyright Holder, attach a permission letter with a signature and contact information. Please inform Client Services when your contact information has changed. Visit <http://naleo.tv/documents> for information on file submission requirements & to review a copy of the Public Access Policies & Procedures.