



ONLINE ACCESS SCHEDULE SHOW DESCRIPTION FORM

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|--------------------------------------|
| Program Title: |
| Producer's Name: |
| Organization (If Applicable): |
| Address: |
| City, State, Zip: |
| Home Phone: |
| Work Phone: |
| Email Address: |
| Show Description: |
| |
| |
| |
| Show's Website Address: |

I hereby authorize Comcast to add the above show description, picture, and/or website address to the online access schedule on their public access website. Comcast reserves the right to edit or omit this description, picture, and/or website address at any time, for any reason. Falsifying information or failure to comply with Comcast access rules and regulations will result in the immediate removal of this description and/or website address from the online access schedule.

Producer's Signature _____ **Date:** _____

Staff Signature: _____ **Date:** _____

OFFICE USE ONLY

| | |
|------------|------------|
| DR: | DO: |
|------------|------------|