

A. NCTV Operating Policies and Procedures Agreement

I, _____, have read and understand to the best of my ability, the NCTV Operating Policies and Procedures Agreement (OPPA), and agree to the terms and conditions contained therein. I understand that the NCTV OPPA is a fluid document, and may change without notice at any given time. I SIGNIFY MY ASSENT TO THESE TERMS AND CONDITIONS AND ANY SUBSEQUENT MODIFICATIONS. It is my responsibility to familiarize myself with the OPPA prior to each and every time I use NCTV equipment. I understand and agree to comply with the information presented in the OPPA. I also understand that I am liable for all equipment that I use and accept financially responsible for replacing any lost, damaged, or stolen equipment in full. I have read, am familiar with, and agree to abide by the policies and procedures of Nantucket Community Television, Inc. as described in the NCTV OPPA.

1. I understand that I am fully responsible for the equipment and facilities I use.
2. I understand that the following material is forbidden for presentation on NCTV Channels:
 - a) Any obscene and/or other programming prohibited by applicable law(s) Any lottery information.
 - b) Any material designed to promote the sale of commercial products or services.
 - c) Any invasion of privacy.
 - d) Any violation of trademark, copyright, or publicity rights prohibited by applicable law(s).
 - e) Any illegal or otherwise prohibited activity.
3. I understand that the material I record will be used for programming Public, Educational, or Governmental Access Channels and may be disseminated by other means by the Access Corporation.
4. I agree to obtain in writing all necessary clearances and permissions from any and all organizations, individuals, and groups as may be needed to record and/or cablecast, web stream and/or distribute program material by any means.
5. I understand I am responsible and agree to indemnify and hold harmless provider(s), NCTV, Inc., its Directors and employees, and their successors from any liability, loss, claim, cost, or damage of any nature whatsoever, which may arise by reason of any claim that any material submitted by me for dissemination by any means infringes and/or violates any rights of any person(s) or organization(s).
6. I understand that I am responsible for all content material that I submit to the Access Corporation.

Name/Organization: _____ Signature: _____

Address: _____ City, _____ State _____ Zip _____

Telephone Number: _____ I.D. Number: _____ Date: __/__/__

Email Address: _____ Date of Birth: __/__/__

Are you under 18 years of age? Y___ N___

If a member applicant is under 18 years of age, name and signature of parent / guardian accepting responsibility:

Parent/Guardian _____ Signature _____ Date: __/__/__