

OFFICIAL USE ONLY: Staff Approval:

Ashburnham Westminster Community Access Corporation

9 Oakmont Drive, Ashburnham MA 01430 | 978-827-5089 | events@awcm.org

New Project Application Form

Project App ID Record:

AWCM requires all new programs created at our facility to complete this form. Please review the Policies and Procedures packet before signing this document. As a reminder, you can reserve equipment and facilities up to 30 days prior to use and it you are required to give at least 48 hours notice at minimum. Please be aware, as an active facility, it may be difficult to reserve equipment with less than a two week notice.

PROJECT INFORMATION	
Project Title	
Producer First Name	Producer Last Name
Co-Producer First Name (If Applicable)	Co-Producer Last Name (If Applicable)
Organization (If Applicable)	
Brief Project Description with Key Points	
Is this a Series Program?	Program Length (Not to Exceed)
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Indicate the project subject matter Indicate the product subject matter All necessary talent and copyright releases required by law must be obtained by I have requested that Ashburnham Westminster Community Media broadcast the for the contents of this program, and indemnify Ashburnham Westminster Community Media broadcast the formula of the contents of the conte	the producer. e program detailed above. I am a member of AWCM and take full responsibility nunity Access Corporation, its Staff, Board of Directors, and it's Members. I give
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Date: