

WGLT TV 7 ~ GREENE LOCAL ACCESS TV CHANNEL

Phone: 946-5146/946-2997 220 Main Street P O Box 510 Greene, Maine 04236-0510
Fax: 207-946-2102

Bulletin Board Application and Information

Organization Name _____

Contact Person _____

Address _____

Telephone _____ Email Address _____

Requested Run Dates: Start: Date _____ Until: Date _____

Information for Display: (Must include “For More Information” [fmi] Telephone Number)

[illegible]

I hereby represent that I am an authorized person from the above organization and have the capability of authorizing this information to be displayed on the Greene Local Access Television Channel (WGLT TV7). Furthermore, I hold the volunteers harmless for failure of display, errors in display, other acts, or omissions that prevent this information from being displayed on the requested days and dates.

I understand nothing will be displayed which contains for profit information.

Signature _____ Date ____/____/____

Office Use Only

Date Received ____/____/____ Received by ____ Authorization Dates Content
Date Put on Channel ____/____/____ Posted By ____
Date Removed from Channel ____/____/____ Removed by ____