



LYNN COMMUNITY TELEVISION

181 Union St. Lynn, MA 781-780-9460
www.lynnntv.org info@lynnntv.org



CHANNELS 37 & 38



CHANNELS 3 & 22

PUBLIC & GOVERNMENT ACCESS
TELEVISION FOR LYNN, MA

PROJECT PROPOSAL & PRODUCTION CONTRACT

This form facilitates the authorization and coordination of the use of LCTV facilities and equipment. Please type or print your answers legibly in the spaces provided. This form must be completed fully, with detail, and approved by all relevant facility administrators before resources may be scheduled. Please note, only certified producers may reserve facilities to work on any project. Please contact LCTV Staff if you have questions.

Producer Name: _____ Member ID: _____
Expiration Date _____
Membership Type: _____
Best Form of Contact: _____
Address: _____ City: _____ Zip Code: _____
Daytime Phone: _____ Evening Phone: _____
Email: _____

Co-Producer Name: _____ Member ID: _____
Expiration Date _____
Membership Type: _____
Best Form of Contact: _____
Address: _____ City: _____ Zip Code: _____
Daytime Phone: _____ Evening Phone: _____
Email: _____

Project Title: _____ Program Length: _____

Is this ... your 1st Proposed Project? Yes No

... for Certification? Yes No

... a new TV series? If yes, how many New Programs are you creating? _____

Program Frequency: Weekly Bi-Weekly Monthly Single Feature Event

How will resulting program(s)/content be distributed? (check one)

Community TV Personal Social Media Platforms

Other Distribution Mediums (Check all that apply)

Bicycling CD/DVD Other _____

LCTV Resources Needed: (Please check all that apply)

Digital Field Equipment Multimedia Center/Editing Suites Studio Studio Equipment

Other _____



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verizon
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Language: (Check all that apply) English Spanish Creole Portuguese Greek
Vietnamese Cambodian Other _____

Primary Age Demographic of Target Audience:

0-12 13-18 18-29 30-64 65 +

Secondary Age Demographic of Target Audience:

0-12 13-18 18-29 30-64 65 +

Program Format: (check one) Talk Show Magazine Variety (w/ Entertainment)

Dramatic (Scripted) How-To (Demonstration) Other _____

Program Theme/Category: (Using the themes defined by Distribution Dept. please check the one that best fits your project.)

- Faith Based Educational Arts & Entertainment Music Cultural Expression
- Neighborhood Focus Politics & Opinion Sports News & Current Events
- Workforce & Employment Youth & Families Special Features

Will this program contain any potentially objectionable material?

Yes (if yes, check all that apply below) No

Violence Coarse Language Sexual Situations Disturbing content relating to human/animal medical procedures, mutilation, excretory functions, etc.

Other _____

Proposal Elements

(Please describe your project more fully in the sections below.)

Purpose of Program:

Outline for Program (Please attach separately)

Please attach or list a Tentative Schedule of any Field or Studio Shoots for this Program

Are you receiving or seeking any financial support for this project? YES NO

If yes, describe: