



VILLAGE OF RIVERSIDE CABLE COMMISSION

**TAPING AND BROADCAST
REQUEST FOR RIVERSIDE TV**

Requests must be submitted four weeks in advance

Contact Name _____

Phone Number _____

Email _____

Organization or Group _____

Date and Time of Event _____

Location of Event _____

Length of Event _____

Start and End Time _____ - _____

Number of Speakers - _____

Attach any additional information if space below is not adequate. Please make sure to fill in everything. Incomplete forms cannot be considered due to the large demand.

1). Describe your event (purpose, number of people participating, etc.)

2). Describe any benefits to the community if your event is aired

If there is a Public Address System being used, please let us know if it has the ability to provide a program out feed that can be used by Riverside TV for audio recording purposes.

YES | NO

If you have any questions regarding this form, please contact Riverside TV by emailing riversidenet6@gmail.com

Mail completed form to:
Village of Riverside
ATT: Riverside TV - Taping Request
27 Riverside Road Riverside, Illinois 60546

We look forward to taping your event!