

Hibbing Public Access Television

PO Box 712 / 211 E. Howard Street / Hibbing, MN 55746
(218) 263-7557 / www.hpat.org / hpat@hpat.org

Video Submission Form

By remitting this form, the "Submitter" agrees to all the stipulations contained therein.

This form must accompany the submitted video. The preferred video format is DVD.

Title of Program: _____

Date submitted: _____

Is the Submitter a resident of Hibbing? Yes _____ No _____

Submitter's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone #1: _____ Phone #2: _____

Email: _____

Video Duration: _____ Hour(s) _____ Minute(s) _____ Second(s)

Brief description of the program: _____

I, (the Submitter) have read and understand Hibbing Public Access Television's operating rules. By submitting materials for cablecasting on HPAT, I agree to indemnify and hold harmless Hibbing Public Access Television, its directors, officers, staff and volunteers against any claims arising out of the use of the program material to be cablecast or including but not limited to claims in the nature of libel, slander, invasion of privacy or publicity right, non-compliance with applicable laws and unauthorized use of copyright material.

I, (the Submitter) am responsible for obtaining all necessary clearances and arrangements with program owners and all necessary ownership and royalty rights will be obtained including copyright and performing right. Commercial programming will not be accepted. Advertising or promotional videos from for-profit entities will not be accepted.

I, (the Submitter) will bear all responsibility for program content and any consequences from program production and distribution on the access channel(s).

I, (the Submitter) understand that Hibbing Public Access Television is not responsible for damage to recorded media while it is in their possession. I further agree to pick up any recorded media within 30 days of submission or it may be disposed of at the discretion of HPAT.

Submitter's Signature