



FAIRFAX PUBLIC ACCESS

PERMISSION TO LIVESTREAM TELEVISION OR RADIO PROGRAM FORM

SECTION ONE: PRODUCER INFORMATION

Program Title

Producer Name

Phone

Email

SECTION TWO: WEBSITE

Permission is sought to livestream the program named above on the following sites:

Website – Please attach an additional list if necessary

SECTION THREE: PRODUCER AGREEMENTS & DECLARATION

- I agree to assume all responsibility and costs for livestreaming the program on another website/s.
- I have obtained all approvals, clearances, licenses, etc. from performers, representatives, copyright holders, broadcast stations, networks, sponsors, music licensing organizations and, without limitation from the foregoing, any and all other approvals as may be necessary to stream this program for viewing on an internet website/s.
- I agree to indemnify, defend and hold harmless Fairfax Cable Access Corporation (d/b/a Fairfax Public Access (FPA)), its directors and staff, and Cox Communications of Northern Virginia, Inc., Verizon Virginia, Inc., and Comcast Cablevision of Virginia, Inc. from any liability or claims arising out of the use of cablecast or internet distribution of this program.
- Permission granted for this request is only applicable to programs that simultaneously air on FPA channels during the livestream.

By signing below I certify that all the above statements are true and accurate.

Producer Signature

Date

SECTION FIVE: MANAGEMENT APPROVAL

Programming Director

Date

Executive Director

Date