CONSENT / APPEARANCE FORM

Organizational Type

__Individual __Ministry __ Church __Artist __Business __Political/Official

Program for Appearance:

__Live __Radio __TV __Web __Magazine

Advertising/Support:

Show Date: ____/____/____ Time: _____

__I will submit my organizational information, resources & activities to the network.
__ I Would like to appear on the Show.
__ I Would like to host a column in the magazine.
__ I Would like to volunteer.

_____
Organization/Business Name

_____ _____
Contact Name Phone

_____ _____
Address City/State/Zip

_____ _____
Email Website

_____ _____
Governing Organization Leader/Owner

General Information

_Are you an independent Organization? __yes __no
_Nonprofit__yes __no Do you have a 501C-3 __yes __no
_Estimated Number of supporters/members_____
_Best Time to Contact: Day_____ Date _____ Time _____
_Others dates you may be available:_____
_Do you have a TV, Radio or internet Broadcast: __yes __no

Describe your ministry, Organization, business or products:
Please attach any brochures, business, cards, presentations etc. of your organization

YOU WILL BE ASKED TO TALK-ABOUT/DISCUSS THE FOLLOWING:

Detailed questions and topics will be emailed or printed for you

"Guest" agrees to appear on the "show" and perform stated function at the stated time as stated in the dates above. Guest must notify the producer in advance, of any cancellations or changes. Our sponsors, partners, attendees, listening and viewing audience are 1) expecting a flawless event and the job that you are agreeing to perform must be accomplished or 2) to hear and see you on the show and at the event based on our promotions and marketing. Our desire is to protect and enhance the images and brands of all parties involved: our supporters, you and/or your organization, constituents and the Network.

"Guest" hereby grants permission to The SC Media Arts Center to photograph and to record the voice, performances, poses, acts, plays and appearances, and use my picture, photograph, silhouette and other reproductions of physical likeness and sound as part of the broadcast and the unlimited distribution, advertising, promotion, exhibition and exploitation by any method or device now known or hereafter devised in which the same may be used, and/or incorporated and/or exhibited and/or exploited.

_____ ____/____/___ _____ ___/___/_____
Signature (Parent or Guardian if under 17) Date Carolina Media Arts Center Rep. Date