



BCTV

Berwick Community Television
Sullivan Square, PO Box 696
Berwick, Maine 03901

Sponsor Application

Sponsor Name: _____ Date: _____

Maine Drivers License #: _____ Expiration Date: _____

Non-profit Organization Name (if any): _____

Email Address: _____

Home Address: _____

Town: _____ State: _____ Zip Code: _____

Producer's Affiliation (Producers name): _____

Production Affiliation (Production name): _____

Telephone Numbers: _____ Home _____ Cell

I hereby certify that I am a legal resident of the TOWN OF BERWICK and I agree to the use of my name as the sponsor for the above named program. I further understand I share the liability for program content with the above named producer and I agree that my name and a local Berwick phone number may be added for a 15 second period at the end of the program to enable viewers to contact me if they have questions about the program.

Signature: _____ Date: _____

Signature of parent or guardian: _____