



TREASURE VALLEY COMMUNITY TELEVISION

Must be completed in full to use TVCTV facilities as a producer.

PRODUCER INFORMATION DATE: _____

ANNUAL PRODUCER FEES

Last Name: _____

	Boise Resident	Non-Resident
Student/Intern	\$30 _____	\$30 _____
Individual	\$50 _____	\$55 _____

First Name: _____ M.I. _____

Residence Address: _____

Family (3 persons) \$80 _____ \$90
\$10 each additional person

City: _____ Zip: _____

Group (4 persons) \$100 _____ \$125
\$10 each additional person

Mailing Address if different: _____

School (K-12, 4 persons) \$100 _____ \$125

City: _____ Zip: _____

Organization (6 persons) \$200 _____ \$250
[Includes colleges and universities]
\$20 each additional person

Phone: Days _____ Night _____

Local Programming only

E-mail address: _____

Imported Out-Of-State Programs \$300

NAME OF PROGRAM _____

ORGANIZATION INFORMATION (If applicable)

Organization name: _____

All rates entitle Producer(s) full access to TVCTV facilities and equipment, and up to 52 half-hour programs a year.

Contact name: _____

Organization address: _____

City: _____ Zip: _____

E-mail address: _____

Can TVCTV publish your name and phone number on the Producers List: ___ yes ___ no (Please check one.)

Staff Use Only

PAID BY: Check # _____ Amount \$ _____ Cash Amount \$ _____

Producer ID # _____