



BevCam Program Proposal and Production Agreement

Producer's Name: _____ Phone: _____

Project Title: _____

Type: Ongoing series Limited series One-time special

Frequency: Monthly Biweekly Weekly Other: _____

Live Broadcast: Yes No

Expected Length: 30 minutes 60 minutes Other: _____

Project Description

Project Production Estimates *(estimate the following)*

Equipment loan required: Yes No How many times/hours? _____

Studio time required: Yes No How many times/hours? _____

Autopilot studio time required: Yes No How many times/hours? _____

Mobile studio time required: Yes No How many times/hours? _____

Edit station time required: Yes No How many times/hours? _____

Other resource needs: _____

Completion date: _____

Possible Project Content Concerns

Will you be using copyright controlled material? Yes No

Will you need talent release forms? Yes No

Other: _____

Producer's Signature: _____ Date: _____