



TriCaster Application Form

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By signing this form, the producer agrees to assume responsibility for the use and condition of equipment used by the producer, including cost of repair and/or replacement, and producer indemnifies, defends, and holds harmless from and against CMN from any claims, damages, losses, liability of any kind, costs, and expenses (including reasonable attorney fees) directly or indirectly related to any use of the television studios, edit suites, portable production trucks (including equipment), and/or the videotape duplication equipment.

Producer: _____

Address: _____

Phone: (H) _____ **(C)** _____

Program Description: _____

Date requested: _____ **Estd. Start time:** _____ **Estd. Finish time:** _____

Remote location: _____

Address: _____ **City:** _____

Equipment Requested:

No. of Cameras? _____ **Wireless Intercom** **Zoom Controllers** **Audio Mixer**
 Lighting **No. of S-Video Cables?** _____

Signature: _____ **Date:** _____

Confirmed by: _____

***REMINDER:**

- It is the producer's responsibility to obtain location, talent and audience releases (forms available at www.cmntv.org).
- Each crew member handling equipment must be certified current CMN members.