



Tredyffrin Township Public Access TV

Annual Crewmember Statement of Compliance Form

- A. I have read and understand the Tredyffrin Township Public Access TV Rules and Procedures Manual available in studio or online at www.tredyffrin.org/general/cable/publicaccess/documents.aspx . I am thoroughly familiar with the rules, policies and procedures regarding the use of Tredyffrin Township Public Access TV facilities and equipment, and agree to abide by them.
- B. I agree to hold harmless Comcast Cable, Tredyffrin Township, Tredyffrin Township Public Access TV, and their agents, employees and representatives from any and all liability and injury (including reasonable attorney's fees and costs incurred in defending claims) arising from, or in connection with: claims of failure to comply with any applicable laws, rules, regulations or other requirements of Tredyffrin Township Public Access TV and all local, state or federal authorities; claims of libel, slander, invasion of privacy, or the infringement of common law or statutory copyright; and claims of unauthorized use of any trademark, trade name or service mark.
- C. I will not represent to others that I am an employee, representative or agent of Comcast Cable, Tredyffrin Township (unless such is the case), or Tredyffrin Township Public Access TV; nor will I make such representations on behalf of any other crewmember.
- D. I attest that I am a non-paid volunteer and that my efforts using Tredyffrin Township Public Access TV equipment and facilities will not result in any personal financial gain.
- E. I agree that I will not allow others who have not been PA2-certified to use Tredyffrin Township Public Access TV equipment while it is in my possession or control.
- F. I understand that false or misleading statements or omissions made in this application are grounds for forfeiture of the privilege to use Tredyffrin Township Public Access TV production equipment and facilities and Channel 2 ("PA2"), and I will hold Comcast Cable, Tredyffrin Township, and Tredyffrin Township Public Access TV harmless against any loss or claim which results from any false or misleading statements or omissions.
- G. I agree that no oral modification, amendment, extension or waiver of this agreement will be binding upon me or Comcast Cable, Tredyffrin Township or Tredyffrin Township Public Access TV.

(Print) Member's Name: _____

Signature: _____

(OVER)

Address: _____

Witnessed by: _____

Date: _____

(Print) Parent/Guardian Name: _____
(If member is under 18 years of age)

Parent/Guardian Signature: _____

Date: _____

In space below, please copy legal identification: