

ALKARMA TV

Program Submission

Thank you for all your support for this ministry.

The following are some items we need to take into consideration for the programs that will be broadcasted on ALKARMA TV satellite channel in USA, Canada, and Mexico.

- 1- I (we) agree that I (we) have the right to give this (these) programs to be broadcasted, and that I (we) have the copyright for this (these) program(s), title, and all types of elements and media contained in this program. I (we) are responsible for material and message contained, and I (we) agree for it to be broadcasted all over the USA, Canada, and Mexico through "ALKARMA TV" with Media Dream.
- 2- If you have your own address or phone number in the program for follow up, you agree to take care of the follow up for your program, and we need to get feed back for the follow up, But if you agree to add ALKARMA TV address or e-mail, we will forward the mail and emails to your ministry.
- 3- The length of the program if it's half an hour should be 28:00 minutes long or if it's one hour it should be 58:00 minutes long.
- 4- Programs should be in NTSC format unless previous arrangements have been made.
- 5- The programs must be submitted in the following formats unless previous arrangements have been made; Mini DV (SP), DVCAM, or Digital format (MPEG2-Stream-NTSC).
- 6- Each program submitted must have the following clearly printed on the label: -Title of the program, -Episode number, -Length of the program (minutes and seconds), -Name of organization, -Name and phone number of a contact person.
- 7- The programs must be submitted 2 weeks before the airing time unless previous arrangements have been made or if it will be broadcasted live.
- 8- Notice of discontinue of airing programs must be made 2 months in advance.
- 9- I (we) promise to pray, support and encourage this ministry as much as we can.

Please fill out all spaces and sign the form at the bottom:

I (We), _____ (print name), agree to comply with the above requirements.

Organization or Ministry: _____

Address: _____

Phone: _____ E-mail: _____

Name of the program: _____

Program subject: _____

Main Speaker: _____

Length of the program: _____ Format: _____

Notes or requests: _____

Signed _____ Dated: _____