



Public Access Television

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Studio Reservation Form

Serving Cheshire, Meriden & Southington

patv15.com

Today's Date: _____

Name: _____

Address: _____

City: _____ State: _____ ZIP: _____ - _____

Home Phone: (_____) _____ - _____ Cell Phone: (_____) _____ - _____

Date reserved: _____ Time In: _____ Time Out: _____

Crew Members

(must have completed studio training course given by Cox Communications Staff)

_____	_____
_____	_____
_____	_____
_____	_____

I acknowledge my responsibility in regards to the use of the Public Access facilities and agree to abide by all the rules set forth in the Cox Public Access User's Handbook. The handbook may be viewed at www.PATV15.com Cheshire, Forms & Handbook.

User Signature: _____ Date: _____

Scheduled By: _____ Date: _____