



**To: Friends of Access Sacramento and Community Media**  
**From: Access Sacramento Board of Directors**  
**Re: Express Your Community Pride with a "Hometown TV" Production Grant**

Access Sacramento receives annual grant funding from the Sacramento Metropolitan Cable Television Commission to create 25 community events and *Hometown TV* programs for non-profit organizations throughout the county of Sacramento. This funding covers personnel costs of Access Sacramento for pre and post production work, and multiple-camera, switched programming for 25 separate community affairs, such as a musical performance, youth sports activity, important public hearings, community celebrations and parades, to name a few examples.

Averaging two to four *Hometown TV* programs per month, Access Sacramento staff works with community leaders throughout Sacramento County who designate events and submit applications for production services and airing over our cable TV Channels 17 and 18. The trained truck or "Studio-in-a-Suitcase" crews number 5-12 people for each taping, depending upon complexity of the event. Events, occurring indoors or outdoors, are recorded and then cablecast in their entirety. Please note that programs selected for *HomeTown TV* are not "documentaries" (shot with a single camera with later editing). They are community activities offered in their entirety to viewers to experience as though they had attended themselves.

If you are involved with an organization sponsoring a community event and meets our production service criteria (see application), have your event organizer complete the attached application and mail or fax it to Access Sacramento ASAP, even if it is scheduled months in the future. We ask that applications be submitted at least 45-60 days in advance.

We are sure you can identify many diverse and enjoyable happenings that represent our remarkable region. *Hometown TV* will document and share the best of Sacramento County events with 265,000 cable TV viewing households. Sponsoring organizations that are selected by Access Sacramento for a *Hometown TV* program will also receive one complimentary DVD of the event. If further copies are needed, Access Sac can make these arrangements. Thanks for your interest in Access Sacramento.

Access Sacramento, Coloma Community Center  
4623 T St. Sacramento, CA. 95819  
[www.accesssacramento.org](http://www.accesssacramento.org) (916) 456-8600 #112 (916) 451-9601 (fax)

**NOTE: While we attempt to respond to all *Hometown TV* requests, there is no guarantee of selection, given the numerous applications we receive. Access Sacramento will consider all requests carefully and make decisions based on application details and availability of production resources. If selected, organizers shall "recognize" Access Sacramento as a major underwriter of the event and include Access Sacramento in all promotional opportunities. In order to extend our services across many Sacramento County communities, our policies dictate no more than one *Hometown TV* event per organization may be selected during the year. For similar reasons, annual events - those submitted for *Hometown TV* for the same event by the same organization each year - will be considered only with special arrangements and associated fees as approved by the Access Sacramento Programming Committee. Such decisions by the Programming Committee or its designee are final.**



HOME TOWN APPLICATION PROPOSAL

Submission Date: \_\_\_\_\_

**Hometown TV Event (Please print legibly & thoroughly)**

Name of Event (name of TV program): \_\_\_\_\_

Date of Event: \_\_\_\_\_ Time Event Begins: \_\_\_\_\_ Time Event Ends: \_\_\_\_\_

Location of Event (specific address): \_\_\_\_\_

**Name of Event Organizer (person in charge)**

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ e-mail \_\_\_\_\_

**"Day of" Event Coordinator (person we can contact for event coordination and permissions):**

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ e-mail \_\_\_\_\_

**Pre-production planning (to be completed at least five (5) working days before day of event).**

- Written copyright permission/talent releases to video record event
- Complete a site survey of event location with Acc/Sac Production Staff Member/Engineer
- List of all names and titles of participants (correctly spelled) to be included in program credits
- Contact Acc/Sac designee regarding electronic event sponsor logos/other items to be included at end of program (916) 456-8600 #132
  - **The financial value of this HT-TV production grant ranges from \$2,000 to \$6,000. Applicant agrees to listing Access Sacramento as a major underwriter of the event and pledges to provide a meal break for the production crew. Failure to do so may result in invoicing the organizers for these fees.**

**NOTE: If above items are not supplied before the event,**

Hometown TV production of your event may be cancelled.

Describe the Event (at least 25 words and use additional pages as needed)

---

---

---

---

---

Describe what the TV audience will “see” and “hear” in the TV program. (at least 25 words)

---

---

---

---

---

Many applications have been received. Why would this event be excellent for “Hometown TV”? (at least 25 words). How does televising this event serve the greater community?

---

---

---

---

---

What technical, production, or location challenges must be overcome for this event to appear as a televised event? (at least 25 words) “No Challenges” is not an acceptable answer.

---

---

---

---

---

List the name and contact information for those in charge of the following:

**Technical Site Manager** responsible to sound, power, lighting, parking, etc.

NAME \_\_\_\_\_ PHONE \_\_\_\_\_ E-MAIL \_\_\_\_\_

**Personnel & Event Manager** responsible for program, logos, list of guests and artists to be credited in the television program. Agrees to supply correct spelling of all names before event via e-mail to [postmaster@AccessSacramento.org](mailto:postmaster@AccessSacramento.org).

NAME \_\_\_\_\_ PHONE \_\_\_\_\_ E-MAIL \_\_\_\_\_

**Supervisor of all Event Personnel** who is responsible for this agreement and can be contacted if unforeseen problems occur. This person has authority to make decisions and resolve issues.

NAME \_\_\_\_\_ PHONE \_\_\_\_\_ E-MAIL \_\_\_\_\_