

Community TV non-resident eligibility form

Applicant name: _____ Email: _____

Home phone: _____ Work phone: _____

Street address: _____

City: _____ State: _____ ZIP code: _____

Eligibility options

Check one and complete the information below.

I work in St. Louis Park.

Business: _____

Street address: _____

City: _____ State: _____ ZIP code: _____

Email: _____ Phone number: _____

Work reference: _____

I attend school in St. Louis Park.

School: _____

Street address: _____

City: _____ State: _____ ZIP code: _____

Email: _____ Phone number: _____

School reference: _____

I am a member of a St. Louis Park community organization for which I want to produce a program.

Organization: _____

Street address: _____

City: _____ State: _____ ZIP code: _____

Email: _____ Phone number: _____

Organization reference: _____

Applicant signature: _____ Date: _____

Date: _____ TV 15/96: _____