

INFO CHANNEL 7 MESSAGE APPLICATION

Your Local Government Access Channel in Pleasant Hill, Missouri

DATE OF APPLICATION:	
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EVENT TO BE ADVERTISED:	
LOCATION OF EVENT:	
CHARGE (IF APPLICABLE):	

PUBLIC EVENT: YES NO

BRIEFLY DESCRIBE DETAILS OF EVENT OR ATTACH AN EVENT FLIER:

CONTACT NAME:	
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CONTACT NO.:	
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*NOTE: The Local Government Cable Access Advisory Committee reserves the right to refuse any application if deemed inappropriate and/or edit the announcement and revise the format for broadcast.

FOR OFFICE USE ONLY:

Date Received: _____ Clerks Initials: _____

Beginning Broadcast Date: _____

Ending Broadcast Date: _____

Notes (if applicable):
