



# DRACUT ACCESS TELEVISION, INC.

*Agreement with Policies and Regulations (Form B)*

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**Dracut Access Television, Inc.  
91 Mill Street, Suite 8  
Dracut, MA 01826  
978-957-5522**

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**FOR PRODUCERS**

I, \_\_\_\_\_ HAVE READ, AND AM FAMILIAR WITH AND AGREE TO ABIDE BY DRACUT ACCESS TELEVISION, INC. POLICY AND REGULATIONS AS SET FORTH IN THIS DOCUMENT.

MEMBERS SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

**For PARENT or LEGAL GUARDIAN if Producer is under 18 years of age:**

I, \_\_\_\_\_ HAVE READ, AND AM FAMILIAR WITH THE DRACUT ACCESS TELEVISION, INC. POLICY AND REGULATIONS AS SET FORTH IN THIS DOCUMENT, AND AGREE TO ACCEPT RESPONSIBILITY OF MY MINOR CHILD.

PARENT/LEGAL GUARDIAN SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_