



Program Application Form

Please send to: PO Box 876 Seymour 3661

Contact Details

Name: _____

Address: _____

Email _____ [] Don't have email address.

Phone: _____ (Home)

_____ (Mobile)

Description of Proposed Program:

Type of program: [] Music [] Information / interviews [] Community group

Describe the program: what you will include, example: music, style, and content:

(Please use another page if needed)

Preferences for days and times: 1. _____ 2. _____

Important Note:

Your application may result in a meeting with our Program Manager to assist in placement or to discuss alternate options. All program presenters are required to join as members of Seymour FM, and to participate in "broadcast essentials" training, provided by the station. Presenters may also be asked to participate in promotions efforts and will be encouraged to attend radio station functions from time to time. All positions are unpaid, and programs are subject to regular review.

Please sign below, that the information provided is correct, and that you understand the Important Note described above, in connection with this application.

Signature _____ Date: _____