



Borough of Oakland Communications Commission

Bulletin Board Posting Request Form

Applicant's Information

Name of Organization: _____ Today's Date: _____

Organization Address: _____
Street Address

City _____ State _____ ZIP Code _____

Contact Person Phone: _____ Contact Person Email: _____

Contact Person Name: _____

I/we accept full responsibility for the bulletin board message submitted for broadcasting on the Bulletin Board of the Borough of Oakland. I, individually and on behalf of the Organization listed above, hereby agree to indemnify and hold harmless Operator and its partners, affiliates, officers, directors, employees, and agents from and against liability, damages, and expenses (including legal fees) arising out of any and all claims incurred as a result of broadcasting this bulletin. I/we acknowledge that Operator shall not be liable to me/us for any failure of Operator to broadcast this bulletin as scheduled, whether because of the breakdown of equipment or any other reason.

Do you agree to these terms and conditions? YES ☐ NO ☐

Event Information

In filling out the rest of the form below with the applicable information, I agree to the following: For editing purposes, the Bulletin Board Committee member posting the announcement reserves the right to make changes, deletions, corrections, or additions as necessary in order to maintain reasonable standards of clarity and good taste. Forms should be submitted at least three (3) weeks prior to the date you want the message to begin airing to allow one (1) week for the request to be processed and then to provide two (2) weeks of airtime for your request. The maximum airtime shall be two (2) weeks.

Do you agree to these terms and conditions? YES ☐ NO ☐

Date of the Event: _____ Type of Event: _____

Time of the Event: _____ - _____ Event Contact Person (if different than person filling out request): _____

Event Contact Person Phone Number (if different than person filling out request): _____

Event Contact Person Email (if different than person filling out request): _____

Address of the Event: _____

Include on Borough Website? YES ☐ NO ☐ Include in Borough Newsletter? YES ☐ NO ☐

Dates to Begin and Stop Airing on Oakland TV? _____

Additional Information

Ticket prices? Web Link? Special Instructions?

Disclaimer and Signature

I certify that my request form responses are true and complete to the best of my knowledge.

Signature: _____ Date: _____

Submit this form by doing one of the following:

- Fax this to the Oakland Communications Commission TV Control Room at **201-405-7592**
- Drop off at Oakland Borough Hall for the Borough Clerk
- Mail to **Oakland Communications Commission, ATTN: Bulletin Board Committee, Borough of Oakland, 1 Municipal Plaza, Oakland, NJ 07436**

You can also fill out a digital Google form which can be found on the Communication Commission webpage at **www.oakland-nj.org/communications-commission**

Borough Clerk Received

Signature: _____ Date: _____