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LOCAL CHANNEL 3 PUBLIC ANNOUNCEMENT FORM

This is limited to public service announcements and information for non-profit organizations.
The decision to air or not to air an announcement is at the sole discretion of MIDTEL.

Your Name: _____ Telephone: _____

Organization: _____

Address: _____

Announcement (Please Print)

What it is: _____

Where it is: _____

When it is: _____

Why or what is it for: _____

Any additional information: _____

START DATE: _____

END DATE: _____

I certify that the above written information is correct to the best of my knowledge. I understand and agree that MIDTEL is not responsible for any misrepresented information obtained from the above provided information. If any information is incorrect, either above or when presented on the Local Channel, I understand that it is my or my organization's responsibility to notify MIDTEL of the error as soon as possible.

Signature: _____ Date: _____