

Sign-up Form

School Name (the "School") _____
Street Address _____
Mailing Address (if different) _____
City/ST/Zip _____
Telephone Number _____
Main Fax Number _____
E-mail Address if applicable _____
Principal's Name _____
Key Operator's Name (person designated to operate equipment) _____
School District Name _____
District Superintendent Name _____
District Address _____
District City/ST/Zip _____
District Telephone Number _____

Are any other schools in the district presently receiving Channel One Network service? Yes No

Check School Type: _____ Public _____ Parochial _____ Private/Non-religious

Provide enrollment for each grade represented at this school (grade six and above only please):

_____ 6th _____ 8th _____ 10th _____ 12th
_____ 7th _____ 9th _____ 11th _____ Total 6-12

Total Channel One TVs school is eligible to receive: _____
(Eligible for 1 TV per 23 students in grades 6 and above, so please divide grades 6-12 enrollment by 23 for eligible TVs)

School hours: _____ am to _____ pm
_____ Eastern _____ Central _____ Mountain _____ Pacific

Grades 6-12 classrooms at school: _____
Grades 6-12 teachers at school: _____
% Male Students (approximately): _____%

School sales tax exempt #: _____

If school is under construction/renovation, the expected completion date is: ____/____/____

Installation Contact _____

Installation Contact Phone Number _____

This school is to be made accessible for installation between the hours of 3 pm and midnight on attendance days and 8 am to 5 pm on non-attendance days (which include weekend and holidays) unless otherwise stated here:

Students will view CHANNEL ONE NEWS daily at ____:____ / __am __pm on at least 90% of school days. If CHANNEL ONE NEWS is not to be shown in a single showing or at the same time every day, please describe viewing schedule in detail:

Comments: _____

The School and Channel One, LLC (formerly Channel One Communications Corporation) hereby enter into this School Agreement. The School will participate in the Channel One Network in compliance to the TERMS & CONDITIONS OF NETWORK PARTICIPATION, which must be reviewed prior to signing. TERMS can be reviewed online at www.ChannelOneHelp.com or call 888.467.3784 to request by mail.



Kathy J. Goodman Channel One Representative

Please return to: Channel One Network
3100 Breckinridge Blvd.
Suite 529
Duluth, GA 30096
Phone: 888.467.3784
Fax: 770.613.0222

School Authorization Signature

Print Name/Title

Authorization Date

OFFICE USE:

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Participation Terms & Conditions can be reviewed and printed online at www.ChannelOneHelp.com. Thank you!

Send School Agreement by fax to 770.613.0222