



City of Piedmont  
 120 Vista Avenue  
 Piedmont, CA 94611  
 (510) 420-3083  
 kcom@ci.piedmont.ca.us

**VIDEOTAPING REQUEST FORM**

Please fill out and submit this request form at least 2-4 weeks before the event you would like videotaped. *NOTE: Submitting this form **does not automatically schedule your request**. You will always be contacted by KCOM staff to discuss production details prior to confirmation. Also, a Talent Release (consent) Form must be signed by/for all persons who appear in event.*

Items with an \* indicate a required field.

**REQUESTOR INFORMATION**

Name \*

Phone \*

Email

Organization \*

**EVENT INFORMATION**

Title/Subject \*

Location \*

Date \*

Time \*

Which category best describes your intended audience? \*

General                      Children & Youth                      Seniors

**Brief Event Description**

*NOTE: Any changes in date, time, location or event production restrictions may result in cancellation of requests due to KCOM staffing, equipment or scheduling conflicts.*

FOR KCOM USE ONLY	
Date Received:	Received By:
Date Request Reviewed:	Request Is:            APPROVED            DENIED