



PROGRAM APPLICATION  
FORM 2021  
May 31st – Aug 31st

3 MONTHS

VALID FOR ONE PROGRAM APPLICATION

\*\*\* All Applicants Must Be Current Financial Members of Tank FM \*\*\*

PERSONAL DETAILS (please print clearly, all details)

Name: .....

Address: .....

Phone Numbers: Day ..... Night ..... Mobile .....

Fax Number: ..... Email Address .....

I am a current financial member of Tank FM: ..... Yes/No

I have completed a Training Course in Radio Presentation ..... Yes/No

PROGRAM DETAILS

Name of Program .....

Preferred Day ..... Preferred Time: Start ..... Finish .....

Alternative Day ..... and/or Alternative Time: Start ..... Finish .....

Brief description of program (including what new segments you intend to introduce) .....

.....  
.....

Program Priority Rating (for more than one program) 1 2 3 4 5 ..... (circle a number)

Do you share this program with another presenter? ..... Yes/No

Name of other presenter .....

Do you alternate with another presenter(s)? ..... Yes/No

Name(s) of other presenter(s) .....

Are you available as a relief presenter ..... Yes/No

If Yes please indicate day(s) and time(s) .....

By signing this form, I declare that I have read and understood the current Presenter's Agreement, and that I agree to abide by the provisions of the presenter's agreement at all times.

Name (print): ..... Signature ..... Date .....