



Auburn Community Television
Tape Request Form

Show: _____

Date: _____

If you do not know the name of the show, please provide the date and time aired.

Date: _____ Time: _____

Please make _____ video(s).

Enclosed is my check for \$ _____. *Tapes are \$13.00 each

Name: _____

Address: _____

Phone Number: _____

Mail To:
Auburn Community Television
P.O. Box 818
Auburn, CA 95604

- Please mail my order.
(Please include \$5.00 S/H per order)
- I will pick it up.