

SIGN UP NOW FOR RED CARPET SEASON ON REELZCHANNEL!

System: _____

DMA: _____

Contact Name: _____

Address: _____

Phone: _____ Email: _____

Basic Sub Count: _____ REELZCHANNEL Sub Count: _____

Average per Spot Value: _____

Preferred Format of Cross-Channel Spot Delivery:

FTP Download BetaSP DVD

I have read and agree to the RED CARPET SEASON participation guidelines.

Signature: _____ Date: _____

Return completed form to REELZCHANNEL by fax 505.212.8801 or email affiliateinfo@reelz.com.