

VIDEO SCREENING INFORMATION	
Name of Event Sponsor (UK Dept/Student Org):	
Contact Person:	_ Telephone Number: ()
UKY E-mail Address:	Reservation ID # (If Known):
Name of Video/Film:	
Name of Distributor/Agent:	
Date(s) of Screening:	_ Time(s) of Screening:
Location (Building & Room):	
POLICIES/GUIDELINES	
 In providing this video screening request to the Office of University Events, I certify the following with my signature: I am screening the video in a room which I have reserved, and I am the event sponsor contact. The public viewing rights document, which must be submitted with this form, should include the time, date and location of the film as well as the film title. The Federal Copyright Act (Title 17 of the US Code) governs how copyrighted materials, such as movies, may be used. Neither the rental nor the purchase of a copy of a copyrighted work carries with it the right to publicly exhibit the work. Non-classroom use at universities requires a public performance license/public viewing rights be obtained. I understand as the event sponsor I am fully liable and responsible for payment of fees and contract obligations as they may relate to the screening of this video/film. 	
CONFIRMATION	
I understand that there are only three ways films/videos can be screened on UK's campus and have indicated herein the terms of my agreement with the owner(s) of the video/film (select one option below):	
I have entered into a non-theatrical license rental agreement win proof the person in possession of the video/film has done so for into this category. PUBLIC VIEWING RIGHTS MUST BE ATTACH.	screenings requested. Most screenings at UK fall ED TO THIS FORM.
I have purchased the video/film for public screening, with the licensing rights being made a part and parcel of the purchase price or obtained proof that the person in possession of video/film has done so. PUBLIC VIEWING RIGHTS MUST BE ATTACHED TO THIS FORM.	
☐ I am screening a video/film under the provisions of a specific statutory exemption, as it applies to the University of Kentucky, the video/film is shown for a regularly scheduled class where or advertised, admission is not charged, and the video copy has be	is for classroom use. Classroom use means that ally members of the class are invited, is not
Signature of person making request:	Date:
Please return this form to: Office of University Events (A150 Ga	atton Student Center) OR events@uky.edu
For Office Use Only: Confirmed by: Office of University Events Sta	Date: