INFORMATION REQUESTED FOR PERMISSION TO BROADCAST MUSICAL WORK

1. Material to be used: (Attach additional sheet(s) if necessary.)

Title: ___________________________ Composer: ___________________________

2. Projected use:

Broadcast date: ___________________________ Duration of requested use (if more than one time): ___________________________

Music to be broadcasted as:  
[□] Feature performance  [□] Background music  [□] Theme song

Station type:  
[□] Network  [□] Local  [□] Cable  [□] Public

Broadcasted performance to include:  
[□] Paid commercials/advertisers  [□] Public service announcements at no charge  [□] Other (please specify) ___________________________

Length of broadcasted music (hours minutes seconds): ___________________________ Total length of broadcasted performance (hours minutes seconds): ___________________________

Title of program: ___________________________ Release date: ___________________________

Number of video recordings/copies: ___________________________ Retail price per copy: ___________________________

Number of copyrighted songs: ___________________________ Uncopyrighted songs: ___________________________

Type of distribution intended (to general public, schools, churches, or otherwise): ___________________________

 Territory in which recording is to be marketed. If distribution in Canada and other countries outside the USA please so state, along with what proportion of total distribution will be made to these countries.

3. Person or Firm seeking permission:

Name of person or firm to be named as licensee (i.e., the copyright owner of the projected work, if it is to be copyrighted): ___________________________

Organization: ___________________________ Attention: ___________________________

Street address: ___________________________

City: ___________________________ State: ___________________________ Postal Code: ___________________________ Country: ___________________________

Telephone number(s): ___________________________ Fax: ___________________________ Email address: ___________________________

Name and address of final licensee (if different from above): ___________________________

4. Preferred schedule of payment: (We reserve the right to determine final schedule of payment.)

Indicate:  
[□] In advance  [□] Quarterly  [□] Annually  [□] Semi-annually  [□] Other: ___________________________

ATTENTION: LICENSING DEPARTMENT

5536 NE Hassalo  •  Portland, Oregon  •  U.S.A. 97213-3638

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