



WRITER MEMBERSHIP APPLICATION FORM

Please complete and print for your records.
On completion, please hit **Submit E-mail** button

Prefix Family Name First Name

Address

Telephone (Home) Telephone (Business) Telephone (mobile)

Fax E-mail

Sobriquet/Pseudonym

Date of Birth Country of Birth

Nationality Country of Residence

Do you create Do you perform your own works? Musical Style

You are a member of the groups

Are you, or have you ever been a member of any other performing rights society? If so, which?

Are you, or have you ever been a member of any other mechanical rights society? If so, which?

ROYALTY PAYMENT DETAILS

COTT prefers to pay royalties straight into your account. Please provide details below

Name of Bank/Credit Union Branch

Account Name Account Number

MUSICAL ACTIVITIES

In order to qualify for COTT membership, please complete at least one of the sections below:

COMMERCIAL RECORDINGS :

Please provide the name(s) of artist(s), record label, label number(s) date(s) of release(s) territories of release and a list of of the titles recorded. Please include a copy of the commercial recording or a photocopy of the label. (please use upload box for this feature)

RADIO, FILM OR TELEVISION PERFORMANCES:

indicate the stations, title of programmes or films, name of producers and dates of performances.

LIVE PERFORMANCES:

indicate cities, names of the venues and dates of performances. Attach evidence of at least one live performance - that is ticket stub, flyer, newspaper listing or advertisement etc.

PUBLISHER ASSIGNMENT:

indicate name(s) of Publishers(s) and submit copy (ies) of published agreements(s).

I apply for membership in the Organization and agree that, upon acceptance as a Member, I shall execute an agreement with COTT and shall abide by the Organization's By-laws and Rules as enacted from time to time by its Board of Directors.

Date

Applicant's Signature

Please note: This form must also be signed by a parent or guardian if the applicant is under legal age.

Name

Parent/Guardian signature

FOR OFFICIAL USE ONLY

Date application accepted

Qualifications

Date contracts sent