



Copyright Permission Service



2010 FALL CHAMPIONSHIPS

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> Louisville, KY | <input type="checkbox"/> Jacksonville, AL | <input type="checkbox"/> Akron/Canton, OH Area | <input type="checkbox"/> San Antonio, TX |
| <input type="checkbox"/> North Huntingdon, PA | <input type="checkbox"/> Ypsilanti, MI | <input type="checkbox"/> Towson, MD | <input type="checkbox"/> Mountain West Area |
| <input type="checkbox"/> Kettering, OH | <input type="checkbox"/> Houston, TX | <input type="checkbox"/> Atlanta, GA | <input type="checkbox"/> Indianapolis, IN |
| <input type="checkbox"/> Arlington, TX | <input type="checkbox"/> St. Louis, MO | <input type="checkbox"/> Southern California Area | <input type="checkbox"/> Grand National Championships |

Before submitting this form, please visit http://www.musicforall.org/resources/copyright/copyright_guide.aspx for a list of compositions, publishers, and/or composers for which permissions are sometimes denied. Music for All will not accept such requests.

Name _____ School Affiliation _____

School Address _____ E-mail address _____

City, State, Zip _____ School Fax (area code) _____

Home Phone (area code) _____ School phone (area code) _____

MUSIC INFORMATION

Use extra paper if necessary

Selection 1 _____ Selection 3 _____

Composer _____ Composer _____

Copyright Owner** _____ Copyright Owner** _____

Selection 2 _____ Selection 4 _____

Composer _____ Composer _____

Copyright Owner** _____ Copyright Owner** _____

** If Known

PAYMENT INFORMATION



- Check Enclosed School P.O. Enclosed

Charge my:

- Mastercard Visa American Express Discover

Account # _____

Exp. Date _____

Name of Card Holder _____

Signature _____

Fee Calculation

Fee: _____ \$275.00

(-\$50 if BOA Participant): \$ _____

(+\$125 if approval is needed for a performance in less than 21 days): \$ _____

Total Amount Due: \$ _____

Please Read Carefully and Sign Below

I authorize and request Music for All, Inc. to be my agent for requesting permission to arrange the foregoing materials. I agree to pay \$225 (for BOA participating band) or \$275 (non BOA participant) for these services.

I understand and acknowledge that I will still have to execute contracts and pay fees charged by the copyright owner required for the permission to arrange and to send Music for All a copy of my fully executed license(s).

If my performance is less than 21 days after Music for All's receipt of this form and payment, then I agree to pay an additional \$125 for expedited services. The payment of this expedient service fee ensures that Music for All will place my project on a priority level, and will do everything in its power to secure permissions in time for the performance day. However, I understand that there is no guarantee that all permissions will be secured in 21 days. Furthermore, I understand that Music for All's ability to secure permission within this time frame is dependent upon my prompt response to any requests for additional information. Music for All will not refund this additional fee if permissions are not secured in the requested time frame.

I understand that there is no guarantee that all of my requests will be approved. In the event a selection is not approved, I may substitute another selection for which Music for All will attempt to secure permission at no additional cost to me. If permission to arrange is denied for ALL of my selections, I will receive a refund for all but \$100 (or \$225 if using the expedited service) of my fee.

I hereby indemnify and hold Music For All, Inc. harmless should I fail to comply with one or more terms outlined in the licenses procured by Music for All, Inc. on my behalf.

Signature _____ Date _____ Printed Name _____

Name of Arranger _____

Please fax or mail form to: Music for All, Inc. 39 W. Jackson Place, Suite 150, Indianapolis, IN 46225
phone 800.848.2263 - fax 317.524.6200 - www.musicforall.org

Date Entr'd

ID #

Amt \$

CC/Check #

Date