

Application for a Short-term Performing Right Licence

APPLICANT'S DETAILS

PHYSICAL ADDRESS

POSTAL ADDRESS

Vat. Reg. No. _____ Not registered Applied for

Name of Presenter (Co., CC, etc.) _____

Building/floor _____ PO Box _____

Street & No. _____ Town _____

Suburb _____ Postal Code _____

City/Town _____ Postal Code _____ Attention _____

Telephone No. _____ Fax No. _____ Title _____

Contact Person _____ E-mail address _____

Name of Production/Show _____

Type of Production/Show (i.e. Dance, Dramatic, Concert etc.) _____

Duration of actual show (less interval) _____ minutes, Musical duration of show _____ minutes and
duration of interval _____ minutes

Name of Venue & Physical Address (if more than one venue, please specify separately) _____

Seating Capacity of Venue _____ Area in sq. mt. if no seating _____

Actual Dates of Performances _____

Expected Audience Attendance Figure per event/show/day _____

Manner of Music Performances (Recorded and/or Live Music) _____

Gross Expenditure on the Provision of Live Music i.e. Band-, Agency-, Artist Fees etc.) R _____

Ticket Prices _____ Estimated Gross Income from all shows R _____

Are the performances in aid of a Charitable Society? _____

If "Yes" please specify Name, Tel. No. **and** Fundraising Number of the Society _____

A LISTING OF ALL MUSICAL WORKS REFLECTING COMPOSER/AUTHOR/PUBLISHER/DURATION MUST PLEASE ACCOMPANY THIS APPLICATION.
If for any reason this is not possible, please advise us in writing.

I/We hereby declare that all particulars and answers in this application are completed and correct and no material fact has been withheld. (I/We agree that it shall form the basis of the licence issued.)

Name of Applicant _____ Date _____

Signature of Applicant _____ Capacity _____

AUTHORISED SIGNATORY

Name _____ Capacity (Director, Presenter, Organiser, etc.) _____

NB: A separate copy of this script/narrative involved or a brief résumé of the manner in which the production/show will be presented must accompany this application.