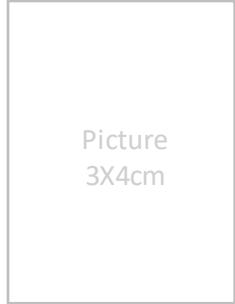




ABRAMUS - Music

MEMBERSHIP APPLICATION FORM



CATEGORIES	REPRESENTATION		
Author/Composer	World	Brazil	Other: _____
Publisher	World	Brazil	Other: _____
Featured artist	World	Brazil	Other: _____
Non-featured artist	World	Brazil	Other: _____
Phonogram producer	World	Brazil	Other: _____

RIGHTHOLDER INFORMATION

Full Name: _____
Date of Birth: _____ Passport Number: _____
Pseudonym: _____
Band/group name: _____
Other pseudonym: _____

Since I do not belong to a similar entity, in strict accordance with art. 97, § 1st of Brazilian Author Rights Law number 9610/98, I hereby come to apply to become a member of ASSOCIAÇÃO BRASILEIRA DE MÚSICA E ARTES - ABRAMUS.

Accordingly, I ask for your approval.

_____, _____ of _____ of _____

Signature

FOR ABRAMUS EXCLUSIVE USE ONLY

ABRAMUS Code: _____	ECAD Code: _____	
CAE/IPI: _____	IFPI Code: _____	HD Code: _____
Codes to match: _____		

RIGHTHOLDER INFORMATION

Full Name: _____

Passport Number: _____ Nationality: _____

State or region of Birth: _____ Gender: M F Other

Father's Name: _____

Mother's Name: _____

Marital Status: _____ Spouse Name: _____

Complete Address: _____

District: _____ Postal Code: _____

Phone: _____ Mobile: _____ Fax: _____

E-mail: _____ Website: _____

PAYMENT INFORMATION

Account Types: Personal: _____	Joint: _____	Account Holder: _____
Bank Name: _____		
Currency: _____	National ID N ^o (for taxation): _____	
Account Number: _____	Swift Code: _____	IBAN: _____

NECESSARY DOCUMENTS:

- Copy of passport
- Proof of address
- Two pictures 3x4cm / 2x3in

