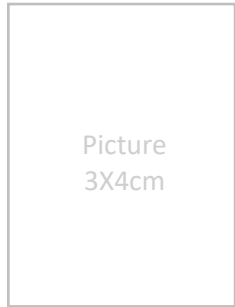




ABRAMUS - Music

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