



MUSIC AUTHORS' COPYRIGHT PROTECTION (MACP) BERHAD (186403-X)
UNIT 8, LEVEL U2, BLOCK D4, (D4-2-8), SOLARIS DUTAMAS, NO. 1 JALAN DUTAMAS 1, 50480 KUALA LUMPUR, MALAYSIA
TEL NO: (603) 62078638 FAX NO: (603) 62062228, (603) 62063268

APPLICATION FOR PUBLISHER MEMBERSHIP

1

NAME OF COMPANY

2

REGISTRATION NO.

DATE & PLACE OF INCORPORATION

3

ADDRESS

REGISTERED OFFICE _____

TEL _____ FAX _____ EMAIL _____

CORRESPONDENCE _____

TEL _____ FAX _____ EMAIL _____

4.

SHAREHOLDER(S)		
Name	Nationality	Shareholding (No. & %)

DIRECTOR(S)	
Name	Nationality

5. STATE IF YOU ARE, OR HAVE BEEN, A MEMBER OF ANY ASSOCIATION OR ORGANISATION ADMINISTERING PERFORMING RIGHTS ANYWHERE IN THE WORLD. IF SO, GIVE DETAILS :-

Name of Association	Date of Election	Date of Termination

6. DETAILS OF CATALOGUES REPRESENTED (Please attach information per format below in separate sheet)				
Catalogues	Date of Agreement	Effective Date	Term	Territory

7. DETAILS OF LOCAL PUBLICATIONS (Please attach information per format below in separate sheet)				
Title	Composer Name & Share (%)	Author Name & Share (%)	MACP Member (Please Circle)	Term/Territory
			Composer : Yes / No Author : Yes / No	

8. **DECLARATION**

I hereby warrant and represent that I am the authorized representative of the Company and has been authorized to apply for membership in Music Authors' Copyright Protection (MACP) Berhad (hereinafter called the "Association"). Each application shall be considered by the Board of Directors of the Association who shall have the right to refuse my Company's application without assigning any reason for such refusal. If elected, the Company agrees to be bound by the Association's Memorandum and Articles of Association, as now in effect and as may be amended, and agrees to execute agreements in such form and for such periods as the Board of Directors of the Association shall have approved or shall hereafter approve for all members. The Company also agrees that the Board of Directors of the Association may in their discretion terminate my membership if it is not included in the certified list of Full Members for five consecutive years.

I warrant and represent that all of the information furnished in the application is true, and that the contract will be subject to cancellation if the information contained in this application is not complete and accurate.

I have read MACP's Personal Information Notice (PIN) made available to me. I understand and agree that the personal information of the individuals in the Company will be dealt with in accordance with the PIN.

I understand that each application shall be considered by the Board of Directors of the Association who shall have the right to refuse any application without assigning any reason for such refusal.

Signature _____ Date _____

Name _____ Designation _____

HAVE YOU ???

TICK

- | | |
|---|--------------------------|
| 1 Enclose a copy of Certificate of Incorporation/Registration? | <input type="checkbox"/> |
| 2 Enclosed a copy of your standard Publishing Agreement with your writers? | <input type="checkbox"/> |
| 3 Enclosed a sample business letterhead? | <input type="checkbox"/> |
| 4 Enclosed a copy of Memorandum and Articles of Association? | <input type="checkbox"/> |
| 5 Enclosed proof of copyright ownership of 50 works published/recorded including recording of 50 works in CD? | <input type="checkbox"/> |
| 6 Enclosed the completed Registration Work Form of your compositions? | <input type="checkbox"/> |
| 7 Enclosed signed copy of the Deed of Assignment? | <input type="checkbox"/> |
| 8 Read and understood the Personal Information Notice (PIN)? | <input type="checkbox"/> |

Mail or send the above documents in a single envelope addressed to:-

**Membership Department
Music Authors' Copyright Protection (MACP) Berhad
Unit 8, Level U2, Block D4, (D4-2-8)
Solaris Dutamas, No. 1 Jalan Dutamas 1
50480 Kuala Lumpur**

Tel: 603-62078638 Fax: 603-62062228 / 603-62063268

<i>FOR OFFICE USE ONLY</i>
MEMBERSHIP REF
DATE OF ELECTION