



# DIGI-DROP LICENSE APPLICATION

INVOICE TO:	LICENSE TO:
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Contact Name: _____	Contact Name: _____
Prod. Company Name: _____	Prod. Company Name: _____
Address 1: _____	Address 1: _____
Address2: _____	Address2: _____
City, State/ Prov: _____	City, State/ Prov: _____
Country, Zip _____	Country, Zip _____
Fax: _____	Fax: _____
E-mail: _____	E-mail: _____

**PRODUCTION INFORMATION:**

Client: \_\_\_\_\_

Agency: \_\_\_\_\_

Production Title/ Episode #: \_\_\_\_\_

Total Production Length: \_\_\_\_\_

First Air Date / Presentation Date \_\_\_\_\_

First 5 Words of Copy: \_\_\_\_\_

**LICENSE TYPE:**

- Digi-Drop     Production Blanket     Single Theme Annual

**CATEGORY OF USE:**

NON-BROADCAST	BROADCAST COMMERCIALS & PROMOS	BROADCAST PROGRAMS	THEATRICAL PRODUCTIONS
<input type="checkbox"/> Productions Not for Resale	<input type="checkbox"/> Local <input type="checkbox"/> Regional	<input type="checkbox"/> Local or Common Carrier <input type="checkbox"/> Nat'l Infomercial or Internet	<input type="checkbox"/> Trailer <input type="checkbox"/> Film
<input type="checkbox"/> Productions For Resale	<input type="checkbox"/> National or Internet <input type="checkbox"/> International (Worldwide)	<input type="checkbox"/> Int'l or Premium Cable/Sat. <input type="checkbox"/> All Broadcast Rights	<input type="checkbox"/> Film Festival <input type="checkbox"/> Live Theater
Number of Copies: _____	<input type="checkbox"/> Commercial Tags	Rights <input type="checkbox"/> All Media <input type="checkbox"/> All Broadcast	All Rights? Yes / No

**MUSIC USED IN PRODUCTION:**

Music Composition Title	Virtual CD Number	Track Number	Duration of Use

