

# Application for Rights Form

NAME OF MUSICAL: \_\_\_\_\_

SCHOOL/SOCIETY: \_\_\_\_\_ ABN/IRN \_\_\_\_\_

Postal Address: \_\_\_\_\_ Postcode \_\_\_\_\_

Contact Name: \_\_\_\_\_ Name of Principal: \_\_\_\_\_

Phone Number (s): Home: (\_\_\_\_) \_\_\_\_\_ Work: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

## INFORMATION ABOUT YOUR PRODUCTION

Name of Theatre: \_\_\_\_\_ Street Address: \_\_\_\_\_

\_\_\_\_\_ Postcode: \_\_\_\_\_

Maximum Seating Capacity: \_\_\_\_\_ Ticket Prices : \_\_\_\_\_

## EXACT PERFORMANCE DATES

1. \_\_\_\_/\_\_\_\_/\_\_\_\_

6. \_\_\_\_/\_\_\_\_/\_\_\_\_

11. \_\_\_\_/\_\_\_\_/\_\_\_\_

2. \_\_\_\_/\_\_\_\_/\_\_\_\_

7. \_\_\_\_/\_\_\_\_/\_\_\_\_

12. \_\_\_\_/\_\_\_\_/\_\_\_\_

3. \_\_\_\_/\_\_\_\_/\_\_\_\_

8. \_\_\_\_/\_\_\_\_/\_\_\_\_

13. \_\_\_\_/\_\_\_\_/\_\_\_\_

4. \_\_\_\_/\_\_\_\_/\_\_\_\_

9. \_\_\_\_/\_\_\_\_/\_\_\_\_

14. \_\_\_\_/\_\_\_\_/\_\_\_\_

5. \_\_\_\_/\_\_\_\_/\_\_\_\_

10. \_\_\_\_/\_\_\_\_/\_\_\_\_

15. \_\_\_\_/\_\_\_\_/\_\_\_\_

## DELIVERY DATES FOR MATERIAL

Rehearsal Material: \_\_\_\_/\_\_\_\_/\_\_\_\_

Orchestral Material: \_\_\_\_/\_\_\_\_/\_\_\_\_

Do you require: (if applicable)

(Optional) Please tick:  Rehearscore CD-ROM  Production Slides  Study Guide  Logo Pack

***Person responsible for accepting delivery of material: (material sent via courier)***

Name: \_\_\_\_\_

Street Address (No PO Boxes): \_\_\_\_\_ Postcode \_\_\_\_\_

Phone Number (s): Home: (\_\_\_\_) \_\_\_\_\_ Work: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

***We will advise if your application has been successful and send confirmation of your booking***