

NAME OF CONTACT PERSON FOR THIS FILE : \_\_\_\_\_

PRODUCER'S NAME + COORDINATES (INCLUDING TELEPHONE AND EMAIL) : \_\_\_\_\_

TITLE OF PROGRAM : \_\_\_\_\_ # EPISODES : \_\_\_\_ DURATION : \_\_\_\_\_

GENRE : TV SERIES VARIETY SHOW/MAGAZINE SHORT-LENGTH FILM MEDIUM-LENGTH FILM FULL-LENGTH FILM

DOCUMENTARY VIDEO CLIP ADVERTISING CONCERT RECORDING CORPORATE VIDEO

OTHER : \_\_\_\_\_

BUDGET OF THE PROGRAM : \_\_\_\_\_ BUDGET ALLOCATED TO MUSIC : \_\_\_\_\_

ORIGINAL SOUNDTRACK COMPOSER : \_\_\_\_\_

IS THE MAIN PROGRAM PRIMARILY CONSTITUTED OF MUSICAL CONTENT? : YES NO

**MUSICAL WORKS REQUESTED**

| TITLE | DURATION                                   | PERFORMER(S) | AUTHOR(S)/PUBLISHER |
|-------|--|--------------|---------------------|
| 01 :  | full length version<br>excerpt ____m ____s |              |                     |
| 02 :  | full length version<br>excerpt ____m ____s |              |                     |
| 03 :  | full length version<br>excerpt ____m ____s |              |                     |
| 04 :  | full length version<br>excerpt ____m ____s |              |                     |
| 05 :  | full length version<br>excerpt ____m ____s |              |                     |

TYPE OF USE : BACKGROUND VOCAL CREDITS

WILL THE MUSIC AND/OR LYRICS HAVE PLAY A PART IN THE STORYLINE ? YES NO

WILL THE LYRICS BE MODIFIED ? YES NO - If YES, please describe the changes in an annex document

**TYPE(S) OF EXPLOITATION**

THEATRICAL TRAILER THEATRES CONVENTIONAL TV : \_\_\_\_\_

PAY TV : \_\_\_\_\_ SPECIALTY CHANNELS : \_\_\_\_\_

ONLINE EXPLOITATION VIDEO (DVD, BLU-RAY) (EXCEPT VOD) VIDEO ON DEMAND (VOD) FESTIVAL

NON-COMMERCIAL EXPLOITATION (SCHOOL, MUSEUM) OTHER : \_\_\_\_\_

**TERRITORY(IES)**

QUEBEC CANADA UNITED STATES N. AM. + EUROPE WORLD OTHER : \_\_\_\_\_

DURATION OF LICENSE : FROM \_\_\_\_\_ TO \_\_\_\_\_

SUGGESTED PRICE BY PRODUCER (EXCLUDING THE MASTER RECORDING) : \_\_\_\_\_

**WITH THIS REQUEST YOU MUST PROVIDE A SYNOPSIS OF THE PROGRAM  
 AND A DESCRIPTION OF HOW THE MUSIC SHALL BE USED**

Please return this completed form by email : [simon.henri@socan.com](mailto:simon.henri@socan.com)  
 by mail : 33 rue Milton #500, Montréal, QC H2X 1V1