



APPLICATION FOR MEMBERSHIP - FORM C/A (Author/Composer)

Ref: DOC/F/001

(Filling in this form does not guarantee you membership at MCSK)

Section 1. Applicants Details

1. a. Surname/name of group _____
 b. First name _____ c. Pseudonym/Stage Names _____
 2. a. Date of Birth _____ b. Place/country of Birth _____
 c. Nationality _____ d. Country of residence _____
 e. Marital Status _____ f. National ID/Passport No _____

Section 2. Address:

Address: _____ Post Code: _____ Town/City _____

Tel: _____ Mobile: _____

E-Mail: _____ Alternative Address: _____

PREFERRED REGION

NAIROBI COAST CENTRAL RIFTVALLEY NYANZA EASTERN WESTERN

Section 3. Category of Membership: (Tick where appropriate)

Composer _____ Author _____ Arranger _____ Publisher _____

Section 4. Other Societies

Are you a full member of any collecting society? If Yes please give details: _____

Please give membership number(s) (if known): _____

Section 5. Territorial Assignment

State the territory in which rights are to be administered _____

Section 6. Payment Details

Bank Name: _____ Bank Address _____

A/c No; _____ Branch _____

Section 7. Representative (Next of Kin)

Contact name: _____ Tel: _____

Address: _____

ID/Passport No. _____ Relationship: _____

Section 8. Others

a. Are you in any full time employment other than being a composer/author? Yes _____ No _____
b. If yes please state the name of the Company/Organisation. _____
Address _____

SECTION 9: Others

a. Is your music played on any Radio Or TV Station? YES NO
If yes please state the name of the TV/Radio Station. _____

b. Attach a stamped letter from the above mentioned Radio/TV station to prove this.

a. Is your music played in any public place? Yes _____ No _____
b. If yes please state the name of the premises. _____

Section 10. Others

I/we understand if admitted, my/our membership will be subject to the Memorandum and Articles of Association of the Society and that my/our rights, obligations and liabilities as a member(s) will be governed by the Memorandum and Articles of Association and all rules and regulations.

Section 11. Applicant and Guarantors Sign

Applicant
Name(s): _____ Sign: _____ Date: _____
Guarantor's Name (Minimum of one year of membership) _____
Membership No: _____ Sign _____ Date: _____

Section 12. FOR OFFICIAL USE ONLY - TO BE COMPLETED BY REGIONAL MANAGERS/DOCUMENTATION OFFICER

I verify that the above applicant's music is played in the above named premise/s on various occasions.
Managers Name _____
Sign: _____ Date: _____
MCSK OFFICIAL STAMP