

# Permissions Form

## Licensee Details

Name of Licensee:	<input type="text"/>
Address:	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
Invoicing Address if different:	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
Telephone:	<input type="text"/>
Fax:	<input type="text"/>
Email:	<input type="text"/>

## Material to be reproduced

Author:	<input type="text"/>
Title:	<input type="text"/>
ISBN:	<input type="text"/>
Word count (prose):	<input type="text"/>
Number of lines (poetry):	<input type="text"/>
Number of images (illustrations):	<input type="text"/>
Language (if not English):	<input type="text"/>

## Work in which Material is to be reproduced

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Publisher:	<input type="text"/>
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Publication date:	<input type="text"/>
Publication price:	<input type="text"/>
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## Permissions Form continued...

**Format (please choose from list below):**

- |   |  |
|---|--|
| <input type="checkbox"/> Paperback                              | <input type="checkbox"/> CD Rom                      |
| <input type="checkbox"/> Hardback                               | <input type="checkbox"/> Closed website              |
| <input type="checkbox"/> Audio Recording for commercial use     | <input type="checkbox"/> Open website                |
| <input type="checkbox"/> Audio Recording for non-commercial use | <input type="checkbox"/> Musical setting (composer)  |
| <input type="checkbox"/> Braille/Moon                           | <input type="checkbox"/> Musical setting (publisher) |
| <input type="checkbox"/> Photocopying                           | <input type="checkbox"/> Other (please specify)      |
| <input type="checkbox"/> Electronic                             |  |

**Additional information:**

*To be completed on behalf of the Grantor*

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The copyright line should read: "© NAME OF AUTHOR DATE"

The Licensee shall send (3) finished copies of the Work to the Grantor at NAME AND ADDRESS OF AUTHOR and one (1) copy to his representative.

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 On behalf of the Grantor

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 On behalf of the Licensee

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