



MASTER USE REQUEST FORM

Date: _____ / _____ / _____

Song Title	
Album	
Artist	
Record Label	
Licensee	
Production Name	
Media	
Description of Use	
Featured/Background	
Duration of music	
Term	
Territory	
Release/Air Date	
Options	
Fee	

CONTACT INFORMATION

Name: _____ Phone: (_____) _____ - _____

Fax: (_____) _____ - _____ E-
Mail: _____