KIDS CAN FILM (www.kidzcanfilm.wikispaces.com)

**MUSICAL RECORDING LICENCE 2013**

(PLEASE USE CAPITAL LETTERS)

**Film-maker or Film-making Team (‘The Film-maker / Team’):**

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**MUSICAL RECORDING LICENCE**

I, the undersigned, understand that Kids Can Film (A team of volunteer teachers in Nelson, New Zealand) is running the Flick-It-On! Film Challenge in 2013 will seek to achieve a widespread audience for some of the films entered in the Challenge.

I hereby licence the Film-maker / Team named above to use the following musical recording in a film (‘The Film’) to be entered in the Challenge:

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*(Details above to include 1) name of music, and 2) recording details, e.g. name and number of recording if known)*

I confirm that the above description of the material is accurate and that I am entitled to complete and sign this form and so to provide a licence in relation to the material.

I give the Film-maker / Team named above and Kids Can Film its licensees and its assignees the right to use on a non-commercial basis all or any part of the material in the Film as it may be edited by or on behalf of the Film-maker / Team and/or Kids Can Film at their discretion, for showing in or in relation to the Flick-It-On! Film Challenge and/or the Film throughout the world on television, the Internet, on DVD and in/on any present or future media, including in advertising and publicity of both the Flick-It-On! Film Challenge and the Film or any part of them or any derivative of them.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PARENT /LEGAL GUARDIAN / CAREGIVER (CIRCLE APPROPRIATE) TO SIGN IF INDIVIDUAL IS UNDER 18 YEARS OF AFE:**

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_