

**SONGWRITING AND MUSIC PRODUCTION  
TRAINING PROGRAMME  
APPLICATION FORM**

**1. GENERAL INFORMATION: (Please print)**

Name of Applicant:
Company Name:
Gender (please tick): Female <input type="checkbox"/> Male <input type="checkbox"/>
Age:
Address:
City:
Country:
Tel: Fax:
Web Site:
Applicant Email:
Collective Management Organization Name:
PIN Number:

**2. TYPE OF COMPANY – (Please tick all that apply)**

<input type="checkbox"/> Songwriter	<input type="checkbox"/> Producer	<input type="checkbox"/> Other Please Specify:
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**3. (a) TYPE OF GENRE (Please tick all that apply)**

<input type="checkbox"/> Soca	<input type="checkbox"/> Calypso	<input type="checkbox"/> Reggae	<input type="checkbox"/> Dancehall	<input type="checkbox"/> Dub	<input type="checkbox"/> Other
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**3. (b) Number of years' experience:**

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**3. (c) Number of songs Written/Produced:**

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**3. (d) Please List 3:**

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