

The Copyright Music Organisation of Trinidad and Tobago SUCCESSOR MEMBERSHIP APPLICATION FORM

Are you an existing memb of COTT?	er Yes:	No:		Date:		
DOCUMENT CHECKLST						
Our admissions criteria include submission of the following documents:						
Death Certificate:	Letter of Administ	ration/Probate:	Copy of ID of the deceased:	Copy of ID/DP/Passport		

SUCCESSOR INFORMATION

Full Legal Name	Last Name:		First Name:			Other Names:		
Gender	Male:	Female:	Name of deceased COTT Memb		nber	Sobriquet:		briquet:
Address								
Telephone	Home		Business		Cellular:			
E-mail				DP/Passpc	ort/ID#			
Date of Birth:	Nationalit	ty:		Country o	f Birth:		Country	of Residence:

ROYALTY PAYMENT DETAILS

COTT distributes royalties directly to your preferred financial institution please provide details below.

Bank/Credit Union Name:		
Bank/Credit Union Address:		
Payee Name:	Account Number:	

The applicant certifies that all information submitted in this application is true and accurate. The applicant further accepts that the statements and claims made in this application are legal and binding on him/her for the purpose of membership in the Copyright Music Organisation of Trinidad and Tobago. The applicant, seeking membership of the Copyright Music Organisation of Trinidad and Tobago understands and accepts that, if admitted, his/her membership will be subject to the Bye-Laws, Rules and Regulations of the Organization and that his/her rights, obligations and liabilities as a member will be governed by the said Bye-Laws, Rules and Regulations as amended from time to time.

Date:	Successor Applicant Signature:
Forms must be signed by a parent or guardian	if the applicant is under the legal age of eighteen (18)

 Name (Print):

 Parent/ Guardian Signature_____
 Date: _____

FOR OFFICIAL USE ONLY

Date application accepted:

Date contracts sent:

Notes/Comments: