

Confirmation of Recording Form ("CRF")



Track Title		Alternate Track Title	
Arranger Name		Recording Company	
Contact Number		Music Producer Name	
Production Company (*for broadcaster purposes only)		Recording Studio Name	
Director Name		Broadcasting Studio / TV Station Name (if any)	
Contact Number			

A) Featured Performer ("FP")

(Please Tick [√])	<input type="checkbox"/> Solo	<input type="checkbox"/> Duet	<input type="checkbox"/> Group Name:	<input type="checkbox"/> Band Name:
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No.	Name of Performers	Stage Name	Role / Instruments Played	NRIC/Passport No.	Contact No.
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					

B) Non-Featured Performer ("NFP") * Including Backup Vocalists

No.	Name of Performers	Stage Name	Role / Instruments Played	NRIC/Passport No.	Contact No.
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					

Catalogue Info

Date of Release		1. Physical	Album <input type="checkbox"/>	Album Title:
Date of Submission			Single <input type="checkbox"/>	
Date of Inlay Submission		2. Digital <input type="checkbox"/>		

We hereby declare that the details furnished above are true and correct to the best of our knowledge and we undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, we are aware that we may be held liable for it.

Confirmed by Music Producer / Recording Studio,

Witnessed by,
(Note: must be one of the performers that involved in the above recording)

Name:
Designation :
Recording Studio Stamp:

Name:
NRIC No.:

RPM ADMIN USED ONLY

RECEIVED BY:

CHECKED BY:

APPROVED BY: