

COPYRIGHT SOCIETY OF BOTSWANA

Unit 1, Plot 93 Gaborone International Commerce Park, Gaborone, Private Bag BO 75, Bontleng, Gaborone, Botswana
 (a non-profit company incorporated under the companies 'Act of Botswana')

APPLICATION FOR MEMBERSHIP

INSTRUCTIONS

1. PLEASE COMPLETE FORM IN BLACK INK
2. TO ENSURE ELIGIBILITY PLEASE USE BLOCK LETTERS

(Filling in this form does not guarantee you membership with COSBOTS)

Section 1. APPLICANTS DETAILS

Surname:	First names	
Pseudonym/Stage Name	IPI Name Number	IPI Base Number
Date of Birth	Place/country of Birth	Nationality
Language	National ID/Passport No	Sex
Profession	Marital Status	Spouse
Country of residence		

Section 2. ADDRESSES:

Home:	Postal Address:	
Tel (Bus):	Mobile:	Fax
Tel (Home):	E-Mail:	
Website:		

Section 3. RIGHT HOLDER ROLES: (Tick where appropriate)

Music:	<input type="checkbox"/> Composer	<input type="checkbox"/> Author	<input type="checkbox"/> Arranger/Adaptor	<input type="checkbox"/> Publisher	<input type="checkbox"/> Performer	<input type="checkbox"/> Producer	Other: _____
Non Music:	<input type="checkbox"/> Film/video:	<input type="checkbox"/> Literature:	<input type="checkbox"/> Graphic/photograph:	<input type="checkbox"/> Visual Arts:	<input type="checkbox"/> Drama/Performing Arts	Other: _____	

Section 4. OTHER SOCIETIES

Are you a member of any other collecting society? Y/N _____ If Yes please give details: _____

Section 5. BANKING DETAILS (Important: COSBOTS will pay royalties you earn directly into your bank account / mobile money wallet)

Name of COSBOTS member	Account Name:
Payment method	Account Name:
Bank Name:	Branch Code
Account No:	Branch
Signature of Account Holder	Signature of COSBOTS member(if different from holder)

I declare that the information given is true and correct, and that I am authorized to sign in my personal capacity. Should any of the above information change at any time, COSBOTS will be notified immediately to avoid any delays in payments, or payment into an incorrect bank account. In addition, I agree and accept that, in the event of the above information being incorrect, COSBOTS will not be held responsible for any delays and/or loss.

Signed at _____ on this _____ Day of _____ 20_____

(Form must be signed by parent/guardian if artist is under 18 years of age)

Section 6. MANAGED RIGHTS (Membership)

Copyright or Neighbouring Rights):

Entry/Admission date: _____ Exit date: _____ Membership status (Position) _____

Region or City (Residence) _____ Circle of Occupation _____

Category of work _____ Rights transferred to COSBOTS _____

	Sound Recordings	Musical Works	Audio Visuals	Literary	Visual arts
Broadcasting					
Public Performance					
Communication To The Public					
Reproduction Rights					

Territories _____ File _____

Section 8. NEXT OF KIN INFORMATION

NEXT OF KIN NAME AND SURNAME _____

ID/Passport no. _____ Relationship _____

Address(es) _____

Contacts: _____ Date _____

Section 9. Inheritance / Beneficiary Information

Date _____ Successor/ Representative _____

Address _____

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Tel No: _____ Email: _____

I hereby apply to be admitted as a member of COSBOTS and declare that the above information is true to the best of my knowledge and that COSBOTS shall not be held accountable in case of any false information provided by myself. I understand that my membership is subject to the membership rules of COSBOTS, the COSBOTS Constitution and the Copyright and Neighbouring Rights Act, therefore my rights, obligations and liabilities as a member shall be governed by the above mentioned statutes, in Botswana.

Section 10. Signature

Name(s): _____ Signature _____ Date _____

(Form must be signed by parent/guardian if artist is under 18 years of age)

FOR OFFICIAL USE ONLY

Registration No..... Effective date of admission.....

Date of Approval of permanent membership by Board

CHECKLIST

Date Received:		Date Processed:		SUBMISSIONS (tick)
Received by:		Processed by:		a. Deed of Assignment b. Work Declaration form c. Passport Photos d. Contracts/Agreements e. Certified ID/ Passport Photo
Checked by/ Date		Membership No:		