



Please mark all appropriate boxes

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### Needle Drop License Application

One License Application per production must be filled out completely, legibly, and mailed, faxed or emailed to us within 5 days of use or license WILL NOT BE GRANTED

## Broadcast Commercials and Promos

Per Use:	Local	Regional	National	Worldwide
Free TV/Basic Cable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pay Cable TV	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PSA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Radio	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All Broadcast Media	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Program

Per Use:	Local	Regional	National	Worldwide
Free TV/Basic Cable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pay Cable TV	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PSA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Radio	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All Broadcast Media	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Program Production Blanket

Per Use:	Local	Regional	National	Worldwide
Free TV/Basic Cable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pay Cable TV	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PSA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Radio	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All Broadcast Media	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Non-Broadcast Corporate / Industrial

Audio       CD ROM       No. Of Units \_\_\_\_\_

Video       Software

DVD       Other

### Video Games

Game Promo/Ad      Format:  Video

In Game Use       DVD       Other

DVD       CD ROM       No. Of Units \_\_\_\_\_

Trailer - US Theatrical Release

Trailer - US TV/Radio

Trailer - Worldwide Theatrical Release

Trailer - Worldwide TV/Radio

Trailer - Home Video/DVD

Trailer - All Media Rights

### Tracking

	CD#	SFYE Title & Track Name	#of Uses
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____

**Terms:** **1. Use** - Each time any piece of music is within a production **2. Pay Cable TV** - Showtime, HBO Etc. **3. All Broadcast Media** - Includes free and pay cableTV, Radio, Internet. **4. All Media Rights** - Includes All Broadcast Media plus Home Video/DVD and Pay Per View. **5. Worldwide Broadcast** - Broadcast in two or more countries. If you are unsure of the type of clearance you need, call us. **DO NOT RISK COPYRIGHT VIOLATION.**

Fill This Part Out

#### Production Information:

Client \_\_\_\_\_

Producer/Facility \_\_\_\_\_

Name of Production/Commercial \_\_\_\_\_

Production Length \_\_\_\_\_ Air Date(s) \_\_\_\_\_

PO# \_\_\_\_\_ ISCI# \_\_\_\_\_

Duration Of Music \_\_\_\_\_

#### Invoice to:

Name \_\_\_\_\_

Company \_\_\_\_\_

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

Phone # \_\_\_\_\_

Fax # \_\_\_\_\_

Email \_\_\_\_\_

#### License to:

Name \_\_\_\_\_

Company \_\_\_\_\_

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

Phone # \_\_\_\_\_

Fax# \_\_\_\_\_

Email \_\_\_\_\_

**STYE Use Only:** Per Use Fee: \$ \_\_\_\_\_

Total License Fee: \$ \_\_\_\_\_