

Use this form to register to participate in the Artists' resale royalty scheme if you are an artist.

**What to do:** complete, sign and return to Copyright Agency Limited by: **Post** 15/233 Castlereagh Street, Sydney NSW 2000

**Fax** +612 9394 7601 **Email** Scanned copies of the form can be emailed to resale@copyright.com.au

**Title** (please tick)  **Mr**  **Mrs**  **Ms**  **Dr**

**Given name:** \_\_\_\_\_ **Middle name:** \_\_\_\_\_

**Surname:** \_\_\_\_\_

**Registered ABN Name** (if different from above): \_\_\_\_\_

**ABN:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_

**Mobile:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Web:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_

**City/Suburb:** \_\_\_\_\_ **State:** \_\_\_\_\_

**Postcode:** \_\_\_\_\_ **Country:** \_\_\_\_\_

**Postal Address** (if different from above): \_\_\_\_\_

**City/Suburb:** \_\_\_\_\_ **State:** \_\_\_\_\_

**Postcode:** \_\_\_\_\_ **Country:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Pseudonym 1:** \_\_\_\_\_

**Pseudonym 2:** \_\_\_\_\_

**Pseudonym 3:** \_\_\_\_\_

**Art Mediums:**

<input type="checkbox"/> Paintings	<input type="checkbox"/> Artist Books	<input type="checkbox"/> Batiks	<input type="checkbox"/> Carving
<input type="checkbox"/> Ceramics	<input type="checkbox"/> Digital Artworks	<input type="checkbox"/> Drawings	<input type="checkbox"/> Engravings
<input type="checkbox"/> Art Jewellery	<input type="checkbox"/> Glassware	<input type="checkbox"/> Installations	<input type="checkbox"/> Lithographs
<input type="checkbox"/> Multimedia	<input type="checkbox"/> Photographs	<input type="checkbox"/> Pictures	<input type="checkbox"/> Prints
<input type="checkbox"/> Sculptures	<input type="checkbox"/> Tapestries	<input type="checkbox"/> Video Artwork	<input type="checkbox"/> Others

### Payment Details – Electronic Fund Transfer (EFT)

**BSB number:** \_\_\_\_\_ **Account number:** \_\_\_\_\_

**Account name:** \_\_\_\_\_

### Declaration

I warrant that all the information I provided on this form is correct. I undertake:

1. to indemnify CAL against any liability incurred by CAL as a direct or indirect result of breach of the preceding warrant; and
2. to notify CAL if there are any changes to any of the information provided on this form.

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_