

....., date.....

(payer's stamp)

HIRE ORDER

WORK:

Composer

Title

Material requested:

☐ score/s ☐ orch. parts, including number of strings: ☐ piano red./vocal s.

☐ choir parts S A T B ☐ solo parts ☐ libretto (language).....

PERFORMANCE DETAILS:

• concert performance

☐ public performance ☐ private performance ☐ free entrance

☐ open air ☐ festival /competition/ other occasion

date/s of performance/s country / city / venue

• stage performance

first-night date.....

opera season /number of performances planned in the season

guest performance/s – date and venue

RADIO/TV RECORDINGS & BROADCASTS:

☐ radio broadcast - domestic / EBU (date, sender)

☐ TV broadcast – domestic / EBU (date, sender)

☐ radio registration + broadcasts (buy-out option): date of registration, sender

☐ TV registration + broadcast (buy-out option): date of registration, sender

☐ Internet streaming audio / audio-video (delete as appropriate):

☐ live ☐ available on a website within one year ☐ available on a website within 5 years

☐ paid access (price) / access free of charge ☐ website address

☐ large video screen presentation / presentation in a hall:

☐ live ☐ played from a recording ☐ date/s / venue

other details

RECORDINGS:

☐ archive ☐ commercial ☐ promotional ☐ studio recording ☐ live recording with an audience:

carrier (CD, DVD, Blu-ray etc.) label

issue including promotional copies distribution range

owner of the matrix of the recording

☐ on-line sale format of files sold price

☐ **synchronisation:** date venue

title of the film/reportage producer

PERFORMING GROUP/S:

orchestra / ensemble / choir

conductor soloist/s.....

FIRST REHEARSAL DATE MATERIALS REQUIRED BY

method of shipment required

DELIVERY ADDRESS:.....

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contact details:

1. Full name.....

phone No.....e-mail

2. Name

phone No. e-mail

☐ quote number (if received)

OTHER / CORRESPONDENCE:

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Rental conditions available on www.pwm.com.pl and in the Hire Library (contact details as above).

We accept the rental conditions [invoice details, full name and signature of the payer]:

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