

## **FPRA - Performance Verification**

Please complete the relevant section(s), sign and return to: GPO Box 15061, Suva, Fiji Islands or fax (679) 330 3340

## **SECTION A (Live Performances)**

Please list details of your last 6 LIVE performances where your original compositions were performed (eg. gigs at clubs, pubs, restaurants and concerts, etc).

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	DATE	<u> </u>	<u> </u>	VENUE NAME	VENUE / AGENT CONTACT  ( )	
2				VENUE ADDRESS	TELEPHONE	
_		1				
	DATE			VENUE NAME	VENUE / AGENT CONTACT	
3		,	,	VENUE ADDRESS	TELEPHONE	
	DATE	1		VENUE NAME	VENUE / AGENT CONTACT	
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U		1				
	DATE			VENUE NAME	VENUE / AGENT CONTACT  ( )	
				VENUE ADDRESS	TELEPHONE	
				n performed live, but have received radio or television/Radio/Internet broadcasts	sion airplay, please complete the following details.	
1		1	1			
	DATE			STATION / CHANNEL	TITLE (FILM, JINGLE, TV SHOW, MP3, MUSIC ON HOLD, ETC)	
2		,	,			
		1				
_	DATE			STATION / CHANNEL	TITLE (FILM, JINGLE, TV SHOW, MP3, MUSIC ON HOLD, ETC)	
3		1	1			
	DATE			STATION / CHANNEL	TITLE (FILM, JINGLE, TV SHOW, MP3, MUSIC ON HOLD, ETC)	
This	form i	s for v		urposes only and will not be processed. It is not a so	not supplied, your application for membership will <b>not</b> be processed.  ubstitute for completing Live Performance Returns, Jingle Reporting Forms, etc.  Telephone	
Signature					Date	