

## UK FE College *PRS for Music* Licence Application

### College Information

College:

Address:

Town:

Postcode:

Number of Full Time Equivalent pupils at your last annual census:

### Contact Information

Contact Name:

Contact Position:

Contact E-mail:

Contact Telephone:

I wish to apply for an annual *PRS for Music* licence for the above premises and declare that, to the best of my knowledge, the information provided is accurate.

Signed:

Print Name:

Date:

Please send your completed form to:

Email: [prs@cefm.co.uk](mailto:prs@cefm.co.uk)

Or fax to: 01494 751423

Or post to: PRS for Music Colleges Licensing Office

CEFM

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