

Use this form to register to participate in the Artists' resale royalty scheme if you are an art market professional, or art buyer or seller.

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

I am an (please tick) **Art market professional** **Art buyer** **Art seller**

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

Given name: _____ **Middle name:** _____

Surname: _____

Position (if applicable): _____

Company Name (if applicable): _____

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:** _____

Citizenship/Residency (please tick): Australian citizen Permanent resident

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: _____