



Canadian Retransmission Collective  
Société collective de retransmission du Canada

Date: \_\_\_\_\_

### **PROGRAM REGISTRATION FORM**

List all programs of which the below named company is the exclusive administrator of retransmission rights in Canada:  
**(PLEASE TYPE OR PRINT CLEARLY)**

Program Title Including Number of Episodes and their Titles	Length in Minutes	Copy- Right Year	Country of Origin	Cdn Content % & Certifi- cation #s.	Copyright Owner and Nationality of same. Include START and END dates of your rights.

This is an addendum to the Authorization Form of:

\_\_\_\_\_  
(Affiliate Name – Please Print)

Per: \_\_\_\_\_  
(Authorized Signing Officer)