|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| THE INDIAN PERFORMING RIGHT SOCIETY LIMITEDNOMINATION FORM (Form of Nomination to be Furnished in Duplicate)To,The ChairmanThe Indian Performing Right Society Limited,208, Golden Chamber, New Link Road,Andheri (w), Mumbai-400053.Sir,I………………………………………………………… a member of The Indian Performing Right Society Limited (“IPRS”), by virtue of execution of the Deed of Assignment dated……………………. vide Membership/ IPI No. …………….………………………… wish to make nomination and do hereby nominate the following person (s) as my sole nominee(s). The supporting documents i.e. Pan Card, Aadhar Card and the Address Proof details of each nominee(s)/ minor/guardian are attached as **Annexure A** to this form. **PARTICULARS OF NOMINEE/S:**

|  |
| --- |
| Name of the Nominee: …………….…………………………………………………………………………. Date of Birth (MM/DD/YYYY): …………………Relationship: …………………… Share %: ……… Mobile No: ……………………………………… PAN NO.: …………………………………………………..Address: …………………………………………………………………………………………………………………………………………………………………………………Aadhar Card No.: …………………………………………………………………………. Email ID: ……………….……………………………………………………….. |

|  |
| --- |
| Name of the Nominee: …………….…………………………………………………………………………. Date of Birth (MM/DD/YYYY): …………………Relationship: …………………… Share %: ……… Mobile No: ……………………………………… PAN NO.: …………………………………………………..Address: …………………………………………………………………………………………………………………………………………………………………………………Aadhar Card No.: …………………………………………………………………………. Email ID: ……………….……………………………………………………….. |

|  |
| --- |
| Name of the Nominee: …………….…………………………………………………………………………. Date of Birth (MM/DD/YYYY): …………………Relationship: …………………… Share %: ……… Mobile No: ……………………………………… PAN NO.: …………………………………………………..Address: …………………………………………………………………………………………………………………………………………………………………………………Aadhar Card No.: …………………………………………………………………………. Email ID: ……………….………………………………………………………… |

|  |
| --- |
| Name of the Nominee: …………….…………………………………………………………………………. Date of Birth (MM/DD/YYYY): …………………Relationship: …………………… Share %: ……… Mobile No: ……………………………………… PAN NO.: …………………………………………………..Address: ………………………………………………………………………………………………………………………………………………………………………………..Aadhar Card No.: …………………………………………………………………………. Email ID: ……………….……………………………………………………….. |

|  |
| --- |
| Name of the Nominee: …………….………………………………………………………………………… Date of Birth (MM/DD/YYYY): …………………Relationship: …………………… Share %: ……… Mobile No: ……………………………………… PAN NO.: ………………………………………………….Address: …………………………………………………………………………………………………………………………………………………………………………………Aadhar Card No.: …………………………………………………………………………. Email ID: ……………….……………………………………………………….. |

In the event of my death the abovementioned nominee/s are empowered henceforth to hold and receive all royalties, past, present and future in whom all my rights in respect with the Royalty money and other benefits shall vest. Name of the Member:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Below details to be filled only if nominee is minor**As the nominee is a minor on this date, I/We appoint (Name, Address & Age and Contact Details) …………………………………………………………………………………………………………………………………………………………………………………………………….…………………………………………………………………………………………………………………………………………………………………………. as the Guardian. **Name of the Member:** ……………………………………………………………………………………………………………………. **INDEMNIFICATION:** I hereby agree to protect, indemnify and save harmless, IPRS and any of its Affiliates in respect of royalties accrued from IPRS for the works of ………………………………………………………………………………………………. in respect of and against any and all claims, demands, liabilities, damages, taxes, penalties, interest, judgments, losses, costs, charges and expenses or wilful misconduct claimed against IPRS.**Signature of the Member**: …………………………………………………**WITNESS WITH NAME AND ADDRESS**:1. Name: ……………………………………………………………………………………………………………………………………..…Address: ………………………………………………………………………………………………………………………………………………………………………………..Signature: ……………………………………………………………………….2. Name: …………………………………………………………………………………………………………………………………………Address: ………………………………………………………………………………………………………………………………………………………………………………..Signature: ………………………………………………………………………. |

FOR OFFICE USE ONLY

|  |  |  |
| --- | --- | --- |
| Nomination Registration No. | Date of Registration | Signature of the Officer |
|  |  |  |

Instruction:

* All fields in the Nomination Form are to be completely filled in and duly signed.
* Provide nominee details with share (%) percentage against each Nominee.
* 100% royalty share will be allocated in the case of only one Nominee.
* In the absence of % share, royalty will be split equally between all nominees.
* Provide valid KYC document for Nominee. Mention the contact details of the Nominee in the prescribed format.
* The witness should be an adult with a sound mind. Provide valid KYC documents for witnesses.
* Valid KYC document includes - PAN Card and any one of the following - Driving License/Aadhar Card/Passport/Voter ID card.