

**APRA
AMCOS**

LETTER OF AUTHORITY

Membership enquires 0800 69 2772 nz@apra.co.nz www.apraamcos.co.nz

Member name

IPI number

I authorise

NAME

ADDRESS

PHONE

EMAIL

to:

- make enquiries on my behalf; and
- have access to my APRA AMCOS information (including my list of works and royalty payment details); and
- update my personal information

Please select from the following:

- I would still like all correspondence from APRA AMCOS to be sent to myself
- I would like all future correspondence to be sent to my person of authority

This authority shall remain current until ceased by me in writing.

Member signature _____

Date _____

I have read and accept the terms of APRA AMCOS' Privacy Policy www.apraamcos.com.au/privacy and consent to the handling of my personal information as described in those terms.