screenrights
R E S O L U T I O N

Competing Claim Resolution Procedures (CCRP)
Limited Mutual Agreement - Waiver of Claim

Use this form to notify Screenrights when you want to waive your claim on a one-off basis in relation to currently available royalties from the CCF Year and/or a final year of a Distribution Period.
The information you provide on this form is incorporated into, and forms part of, the warranties you provide to Screenrights in your Membership Agreement. Any defined terms used in this form have the meaning ascribed to them under your Membership Agreement.
For more information about temporary resolution, please see the Competing Claim Resolution Procedures (CCRP).

1 | Member name

Member name

Must be the same legal entity name as provided on the Membership Agreement.

Member Number

Where known

Portfolio name

If relevant

Portfolio Number

If relevant and known

2 | Program information

Original title of the program / series (please include season and episode numbers if relevant)

☐ **Applies to the entire series (if applicable).**

3 | Extent of this temporary resolution agreement

☐ **Apply to royalties from the CCF Year only**

☐ **Appy to royalties from the final year of a Distribution Period only**

☐ **Apply to royalties from the CCF Year AND final year of a Distribution Period**

☐ **Apply to all royalty components - Film, Script, and Commissioned Sound Recording**

☐ **Apply to all collection services in Australia and New Zealand -** Australian Educational Service, Australian Government Service, Australian Retransmission Service, New Zealand Educational Service

☐ **Limited to a specific component or collection service, please specify:**

○ **I waive my claim**
I confirm that I waive my claim on a one-off basis in relation to currently available royalties from the CCF year or final year of a Distribution Period as set out above.

4 | Scope of Agreement

☐ **I agree and understand that the waiving of claim referred to in this form (a) is limited to the royalties specified above; (b) does not resolve the competing claims of the underlying registrations.**

5 | Signature

Member Signature*
Digital signature accepted

Print name*

Date*

D D / M M / Y Y Y Y

Insert a digital signature and submit
OR print, sign and send the form to us by email, fax or post.

SUBMIT

what's this?

OFFICE USE ONLY
Authorised by: