

- ▣ **Please fill in the whole form**
- ▣ **Don't forget to include 2 sec audio blanks between the tracks in your Master**



Catalog number: _____
Album title: _____
Performer: _____
 Your name: _____
 Your e-mail: _____
 Your phone: _____

Specifications for double albums: Vinyl A/B (Nr.1) Vinyl C/D (Nr.2)

Playing time **Side A** _____ (hh:mm:ss)
 Playing time **Side B** _____ (hh:mm:ss)
 (incl. breaks between the titles)

Diameter: 12"
Speed: 33 or 45

No.	Song title	Composer <i>(Real Name)</i>	Writer/Lyrics <i>(Real Name)</i>	Playing time <i>(hh:mm:ss)</i>	Side
1					A / C
2					A / C
3					A / C
4					A / C
5					A / C
6					A / C
7					A / C
8					A / C
9					A / C
10					A / C

1					B / D
2					B / D
3					B / D
4					B / D
5					B / D
6					B / D
7					B / D
8					B / D
9					B / D
10					B / D

I have checked all my information and confirm that they are correct.
I hereby declare that I am authorized to reproduce the above titles

City / Date

Signature

Please send the completed and signed form as a PDF to
info@alrol.com