

Texas Educational Colorguard Association

Color Guard Music Licensing Information

Form 7

This completed form MUST be completed and turned into a TECA Board Member. This form must be on file for your unit to be eligible to compete at any TECA event. If your piece is an original composition, please supply an original composition form. Please make additional copies of this form as needed.

Unit Name: _____
Unit Hometown, State: _____
Unit Contact: _____
Unit Contact Phone: (____) _____
Unit Contact Email: _____
Title of Music Selection 1: _____
Composer: _____
Licensing Organization (ASCAP, BMI, SESAC; etc.): _____
Length of Piece: _____ min/sec CD Title: _____
Artist: _____
CD Recording Company: _____

Title of Music Selection 2: _____
Composer: _____
Licensing Organization (ASCAP, BMI, SESAC; etc.): _____
Length of Piece: _____ min/sec CD Title: _____
Artist: _____
CD Recording Company: _____

Title of Music Selection 3: _____
Composer: _____
Licensing Organization (ASCAP, BMI, SESAC; etc.): _____
Length of Piece: _____ min/sec CD Title: _____
Artist: _____
CD Recording Company: _____

Unit Contact Signature _____

Date _____