

Script Details

Please use this form to submit details of your scripted works to the Authors' Licensing & Collecting Society (ALCS).

You can submit claims for television and radio programmes, films and theatre scripts, broadcast on television or radio.

You can submit details online at www.alcs.co.uk via the Members' Area of the site or complete this form and send it to:

ALCS
Freepost RTSH – JHGL – JTYZ
1st Floor, Barnard's Inn
86 Fetter Lane, London
EC4N 1EN

Guidelines for Submission

The information required is:

- the title of the work
- the title of the series (if applicable)
- the channel or production company
- the medium of the work (eg TV, radio, film)
- the type of work (eg drama, documentary)
- the length of work (in minutes)
- the year of production
- the transmission date (if known)
- any alternative foreign title(s) (if known)

If you have written a contribution to a show such as a sketch show, please state the name of the original programme and the length of your individual contribution to the programme.

Script Details Form

Full name:	ALCS Reference: (eg BLOGGSJ73)
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Writing Name:	Please indicate medium of this work:
Title of Work:	Television <input type="checkbox"/>
Title of Series (if applicable):	Film made for television <input type="checkbox"/>
Length of work (in minutes):	Film <input type="checkbox"/>
Alternative foreign titles, if known:	Radio <input type="checkbox"/>
Channel or production company:	Theatre <input type="checkbox"/>
Director, if known:	Type of work (eg drama, documentary):
	Transmission date:
	Year of production:
	Office use only:

Any other relevant information:

Full name:	ALCS Reference: (eg BLOGGSJ73)
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Writing Name:	Please indicate medium of this work:
Title of Work:	Television <input type="checkbox"/> Film made for television <input type="checkbox"/>
Title of Series (if applicable):	Film <input type="checkbox"/> Radio <input type="checkbox"/>
Length of work (in minutes):	Theatre <input type="checkbox"/>
Alternative foreign titles, if known:	Type of work (eg drama, documentary):
Channel or production company:	Transmission date:
Director, if known:	Year of production:
	Office use only:

Any other relevant information:

Script Details Form

Full name:	ALCS Reference: (eg BLOGGSJ73)
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Writing Name:	Please indicate medium of this work:
Title of Work:	Television <input type="checkbox"/>
Title of Series (if applicable):	Film made for television <input type="checkbox"/>
Length of work (in minutes):	Film <input type="checkbox"/>
Alternative foreign titles, if known:	Radio <input type="checkbox"/>
Channel or production company:	Theatre <input type="checkbox"/>
Director, if known:	Type of work (eg drama, documentary):
	Transmission date:
	Year of production:
	Office use only:

Any other relevant information:
