



## **MUSICARES APPLICATION FOR HURRICANE IDA RELIEF**

### **ELIGIBILITY REQUIREMENTS AND PROCEDURES**

**Applicants must be able to document participation in one of the following areas:**

- At least 5 years of employment in the music industry and/or
- 6 commercially released recordings (singles)
- 6 commercially or promotionally released music videos

**Please include the following items required with the completed application:**

*(If you have completed an application for assistance previously, we should have this information on file)*

- Detailed music industry background documentation (articles, liner notes, letters from employers, etc)
- A biography, resume, or discography
- Documentation of loss of income, displacement or loss of property

**Submit the application one of the following ways:**

- Fax the documents to 615.327.0876
- Scan and email the documents to [MusiCaresRelief@MusiCares.org](mailto:MusiCaresRelief@MusiCares.org)

**MusiCares for Music People**  
**MUSICARES.ORG**  
**MUSICARES APPLICATION FOR HURRICANE RELIEF SERVICES**

Name: \_\_\_\_\_  
*(as it appears on your social security card)*

Are you a member of any of the following?  
*(applicants do not have to be a Recording Academy member to receive assistance – for statistical purposes only)*

Recording Academy \_\_\_\_\_ HAMM \_\_\_\_\_ CMA \_\_\_\_\_ ACM \_\_\_\_\_  
AF of M \_\_\_\_\_ SAG \_\_\_\_\_ AFTRA \_\_\_\_\_

Professional Name: \_\_\_\_\_  
*(if different)*

Spouse/Partner Name: \_\_\_\_\_  
*(if applicable)*

Home Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_  
*(if different)*

Daytime/Evening Phone #: \_\_\_\_\_/\_\_\_\_\_

Cell Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Social Security #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Education:  
\_\_ Some H.S. \_\_ H.S. Diploma/GED \_\_ Some College \_\_ College Degree \_\_ Adv. Degree

Ethnicity:  
\_\_ African American \_\_ Asian/Pacific Islander \_\_ Biracial \_\_ Caucasian \_\_ Latino \_\_  
Native American \_\_ Other  
*(optional – for statistical purposes only)*

Marital Status: \_\_\_\_\_

Average Monthly Household Income: \$ \_\_\_\_\_

**PROFESSIONAL CAREER HISTORY:**

Please state how many years you have been employed in the music industry: \_\_\_\_\_

What do you do? \_\_\_\_\_ Primary Genre: \_\_\_\_\_

Please provide a brief work history in the music industry:

*(include any commercially released recordings and/or videos, if applicable)*

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Do you play an instrument(s)?  Yes  No If yes, please list: \_\_\_\_\_

*(it is required that you attach your work history documentation such as resume or discography to this application)*

Are you currently employed outside of the music industry?  Yes  No

If yes, where? \_\_\_\_\_

**BRIEFLY DESCRIBE HOW YOU WERE AFFECTED FINANCIALLY BY HURRICANE IDA:**

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I hereby certify that I have answered the foregoing questions to the best of my ability. The facts herein stated are true and I understand that any misrepresentation of this information may disqualify me for any assistance from MusiCares.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

*To the best of my knowledge, I certify that the above information is true.*