



JOAO CARVALHO MASTERING
Mastering Information Form

ARTIST NAME (as you'd like it to appear in CD text):

ALBUM NAME (as you'd like it to appear in CD text):

CONTACT NAME:

PHONE NUMBER: _____ **E-MAIL:** _____

NUMBER OF SONGS TO BE MASTERED: _____ **FORMAT** (1/2" tape, WAV, AIFF, SDII, etc.): _____

SAMPLE RATE: _____ **BIT DEPTH:** _____

WILL THERE BE ISRCs TO ENCODE? Yes (list attached) _____ No _____

WILL THERE BE A UPC CODE? (if so, please provide): _____

PLEASE PROVIDE A LIST OF SONGS IN THE SEQUENCE YOU'D LIKE THEM TO APPEAR ON YOUR CD
(Attach list if not enough space)

1	
2	
3	
4	
5	
6	
7	
8	
9	
10	
11	
12	