



MEDIA TRANSFER REQUEST FORM

Information

Name:

Date:

Email:

Phone:

Address:

Media type: ☐ Reel to Reel ☐ Cassette ☐ 8Trk Tape ☐ DAT ☐ ADAT ☐ MiniDisc-2trk
☐ MiniDisc-Multitrack ☐ Vinyl ☐ Magnetic Wire

Details about your Media:

Size: _____ Length: _____ Track Count: _____ Speed: _____ Resolution: _____

Does your Media need baking? ☐ No ☐ Yes ☐ I don't know

Does your Media need any restoration? ☐ No ☐ Yes (please explain below)

Media export format: Type: _____ Bit Depth: _____ Resolution: _____

(Unless specified, our default format is: **Type:** BWA V **Bit Depth:** 24Bit **Resolution:** 48khz)

Please provide any special instructions: