



RENEWAL FOR TRADEMARK LICENSE

1. Manufacturer Retailer

2. Applicant's name: _____

Company name: _____

President/Proprietor: (if different from above) _____

Address: _____

City: _____ Province/State: _____ Country: _____

Code: _____ Phone: _____ Fax: _____

Email Address: _____

Other tradenames: (please list on reverse)

3. Marks* applied for (check applicable marks):

Queen's Logo

Flag

Queen's/Queen's University wordmarks

other

4. Product categories:(check applicable):

sports wear

clothing

sundries

giftware

other

5. Retail outlets

Campus Bookstore	local (Kingston)
Other retail (list)	other centres (list)

6. Manufacturer/silkscreener/embroiderer:(if different from above) (if more than one, list on reverse of sheet)

Company name: _____

President/proprietor: _____

Address: _____

City: _____ Province/State: _____ Country: _____

Code: _____ Phone: _____ Fax: _____

7. Signature of Applicant

_____	_____
Signature	Date
_____	_____
Name	Position

Return completed application to:

University Relations – Brand Team
 78 5th Field Company Lane
 Fleming Hall, Stewart-Pollock Wing, 4th floor
 Queen's University
 Kingston, Ontario
 K7L 3N6

Phone: (613) 533-6000, ext. 75516
 Fax: (613) 533-6652

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