



APPLICATION FOR TRADEMARK LICENSE

1. Manufacturer Retailer Student (check applicable)

2. Applicant's name:

Company name:

President/Proprietor: (if different from above)

Address:

City:

Province/State:

Country:

Postal Code/Zip:

Phone:

Fax:

Email Address:

Other tradenames: (please list on reverse)

3. Marks* applied for (check applicable):

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:
Postal Code/Zip:	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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