

Blu-ray Disc Rewritable License Application form (Confidential)

Date : _____

1. Contact Person Information

Full Name	
Title	
Division	
Telephone	
Fax	
E-mail address	

2. Company Information

Official Company Name	
Address (Including country)	
Registered Address of Headquarters (Including country)	
Agreement to Apply	FLLA
Business Category relating to Blu-ray Disc (Rewritable) *Check the applicable category	FLLA Blank Rewritable Media Rewritable Recorder / Player Component (including LSI) Manufacturing Equipments/ Testers
Information Agreement	Are you a party of Blu-ray Disc Information Agreement? Yes (Contact Date : _____) No
Company profile or web site (URL)	

Your application will not be processed until you provide all the required information on this form.

Send this application form to Blu-ray Disc Association by facsimile or e-mail.

Fax: +1-818-763-9027

E-mail: agent@blu-raydisc.info

*After reviewing this form for completeness and accuracy, we will send a confirmation by email to the contact person.