

**BD-Live Logo License And Online Certificate Issuance Agreement**  
**Application form (Confidential)**

Date : \_\_\_\_\_

**1. Contact Person Information**

Full Name	
Title	
Division	
Company Address (Including country and Postal Code)	
Telephone	
Fax	
E-mail address	

**2. Company Information**

Official Company Name	
Registered Address of Headquarters (Including country and Postal Code)	
Business Category relating to BD-ROM Version 2 FLLA *Check the category you are licensed	<input type="checkbox"/> BD-ROM Movie Player •BD-ROM Game Console •BD-ROM Test Player <input type="checkbox"/> BD-ROM PC Application Software
Content Owner	<input type="checkbox"/> BD-ROM CPA <input type="checkbox"/> BD-ROM CPA-Light <input type="checkbox"/> BD LLA <input type="checkbox"/> 3D LLA <input type="checkbox"/> Ultra HD LLA

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

**Fax: +1-818-557-1674****E-mail: [agent@blu-raydisc.info](mailto:agent@blu-raydisc.info)**