

Blu-ray Disc Read-Only Version 2 License Application form

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 *Check the applicable category	<input type="checkbox"/> BD-ROM Media <input type="checkbox"/> BD-ROM Movie Player • BD-ROM Game Console • BD-ROM Test Player <input type="checkbox"/> BD-ROM PC Drive <input type="checkbox"/> BD-ROM PC Application Software <input type="checkbox"/> BD-ROM Component <input type="checkbox"/> BD-ROM Tools & Manufacturing Equipment/ BD-ROM Testers <input type="checkbox"/> BD-ROM Commercial Audiovisual Content
BD-ROM Ver2 Information Agreement Did you obtain BD-ROM Ver1 (Part1), BD-ROM Ver1 (Part 2), and/or BD-ROM Ver2 for 2D (Part 3) under your current Specification Information Agreement?	<input type="checkbox"/> Yes If Yes, Agreement date : _____ Applicable Part: <input type="checkbox"/> Part1 <input type="checkbox"/> Part2 <input type="checkbox"/> Part3 <input type="checkbox"/> No
Are you a Licensee of FLLA BD-ROM Version 2 in other business category?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Company profile or web site (URL)	

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