

## <u>Lamar University</u> <u>Internal Licensing Approval Form</u>

Lamar University is pleased to consider your request to use the identifying trademarks of Lamar University.

Please complete this form and return it to:

Daniel McLemore
 Office of Marketing Communications
 P.O. Box 10116
 Beaumont, TX 77710
 (409) 880-8490

Via E-Mail at Daniel.McLemore@lamar.edu

## **INTERNAL LICENSING APPROVAL FORM**

Proposed design description / graphic must be submitted with this form

| 1. Student Organization / University Depart   | ment:                          |                      |                                |                     |
|---|--------------------------------|----------------------|--------------------------------|---------------------|
| a. Registered Student Organization:           | Yes                            | No                   |                                |                     |
| <b>b.</b> Contact:                            | Phone:                         |                      | E-mail:                        |                     |
| Address:                                      | Ci                             | ty:                  | State:                         | Zip:                |
| 2. Artwork/Product Description:               |                                |                      |                                |                     |
| <b>a.</b> Product will be: (check all that a  | pply)                          | <b>b.</b> If product | is sold, proceeds will be us   | ed for: (check one) |
| Sold to general public                        |                                | ☐ Organi             | zation / Department Fund-      | Raiser              |
| ☐ Given to members only                       |                                | Given                | to a Charitable Organizatio    | n                   |
| ☐ Sold to members only                        | embers only Spec               |                      | Event (describe below)         |                     |
| Other   |                                | Other                |                                |                     |
| Name of licensed screen printer:  a. Contact: |                                |                      |                                |                     |
| <b>b.</b> Cost to you per unit:               | (received from screen printer) |                      | <b>c.</b> Product will be sold | for:                |
| <b>d.</b> Please state product color(s):      | ,                              |                      |                                |                     |
| This section to                               | be completed by                | Office of Ma         | rketing Communica              | <u>tion</u>         |
| Approved                                      |                                |                      | Royalty:                       | ☐ Due ☐ Exemp       |
| Approved with changes:                        |                                |                      |                                |                     |
| Denied for following reason (s):              |                                |                      |                                |                     |
|   |                                |                      |                                |                     |
| Signature of Lamar University Office of M     |                                | ons                  | Date                           |                     |