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**Blu-ray Disc Read Only Format and Logo License Content Participant Agreement –Light Version 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)	
CPA to apply: *Check the applicable one	<input type="checkbox"/> BD-ROM FLL Content Participant Agreement-Light Version
Company profile or web site (URL)	

This application form must be completed or the processing of your license will not be approved.

**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)**

\*After reviewing this form for completeness and accuracy, Blu-ray Disc Association will send a receipt mail to a contact person written above.