## **HUNTING** attractions

LICENSING APPLICATION			
Date:		[ ] New Applicant	[] Renewal
PERSONAL CONTACT INFOR	MATION		
Name:		Title:	
Phone:	Mobile:	Email:	
PERSONAL CONTACT INFORMATION			
Company:		DBA:	
Marketing Contact:		Email:	
Royalty Contact:		Email:	
Company Address:		Tax ID#:	
City:		State:	ZIP:
Phone:		Mobile:	
Website:		Fax:	
Type of Business:			
Customer Type:	[] Manufacturer	[ ] Distributor	[] Retailer
PRODUCT INFORMATION			
Type of Products:			
Pattern(s) Requested: (please specify)			
Fabric Types / Decoration:			
Fabric Supplier / Decorator:			
Other Camouflage Brands Licensed:			
Distribution Chain:			
Territories:	[] USA Only	[] Worldwide	[] Other

Each licensing application packet should be completed in full and faxed, or mailed to the Hunting Attractions, LLC. address below.

Each packet should include; a licensing application, a list of products that your company wishes to carry in our pattern(s) and a formal request for license on your company letterhead. Any literature or photographs of items you wish to carry in our pattern(s) will aid the application review process.

Please allow approximately 30 days for the processing of your licensing application.

## **Hunting Attractions, LLC.**

11062 W Inglin Drive Boise, ID 83709

Phone: 208.870.6370

huntingattractions.com

