

**LICENSING APPLICATION**

**Haas Outdoors, Inc. dba Mossy Oak Brand Camo**

**Attn: Licensing Department**

**26420 E. Main Street · West Point, MS 39773**

**Telephone: (662) 494-8859 ext 2231 · Fax: (662) 492-0212**

**licensing@mossyoak.com**

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| **INTRODUCTION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Thank you for your interest in pursuing a license with Mossy Oak Brand Camo®. We look forward to reviewing your application and working with you to incorporate Mossy Oak into your products. In order to better service your specific licensing needs, we ask that you complete and return this application to** [**licensing@mossyoak.com**](mailto:licensing@mossyoak.com) **or by fax/mail to the address shown above. All information provided within this form is confidential and for use by Haas Outdoors, Inc. only.**  **\*\*\*Please note proof of General Liability Insurance with $1million coverage per incident and $2million General Aggregate minimum is required upon execution of license agreement.**  **\*\*\*New Licensees are subject to a one-time Licensing Fee of $2,500, which is payable upon execution of license agreement.**  *Upon receipt of completed license application, a representative from our Sales & Licensing department will contact you to discuss licensing opportunities with Mossy Oak Brand Camo. If you have any questions or concerns, please do not hesitate to contact our licensing department at 662-494-8859 or by email* [*licensing@mossyoak.com*](mailto:licensing@mossyoak.com) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **YOUR COMPANY INFORMATION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Company Legal Name:** | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **dba if different from above:** | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Physical Street Address:** | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **City, State, Zip:** | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **P.O. Box/Mailing Address** *(if different from above)***:** | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |
| **Phone:** | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | **Fax:** | | | | |  | | | | | | |
| **Web Site:** | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Number of years in business:** | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **CONTACT INFORMATION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **\*\*Primary Contact** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name: | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | Title: | | |  | | | | | | | | |
| Phone: | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | Fax: | | |  | | | | | | | | |
| Mobile | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | E-mail: | | |  | | | | | | | | |
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| **\*\*Secondary Contact** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name: | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | Title: | | |  | | | | | | | | |
| Phone: | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | Email: | | |  | | | | | | | | |
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| **\*\*Financial/Accounting Contact** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **\*\*Signing Officer** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **PRODUCTS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Do you currently license the rights to any other Licenses?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | No |  | Yes | |
| **If yes, please list:** | | | | | | | | | | | Company Name: | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | Address: | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | | | | | | | | | | Years under License: | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
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|  | | | | | | | | | | | Company Name: | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
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| **Description of Product(s) for Desired License:** | | | | | | | | | | | | | | | | | | | | | | | | **See last page – PRODUCT INFORMATION WORKSHEET** | | | | | | | | | | | | | | | | |
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| **MARKETING / SALES** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Expected date of market entry:** | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
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| **MANUFACTURING PRODUCTS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Will you?** | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | **Self-Manufacture** | | | | | | | | | | | | | |  | | | | **Sub-contract** | | | | | |  | | | **Both** | | | | |
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| **Manufacturing Locations/Countries:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| (List all countries/states your products are being manufactured or made.) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Distribution Channels/Markets:** | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
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| **Territories:** | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | **US & Canada** | | | | | | | | | | | | | |  | | | | **Worldwide** | | | | | | |  | | **Other** | | |  | | | | | | | | | |
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| **\*\* Please enclose the following items:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | License Application | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | Product Catalog(s) | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | Company Brochure(s) | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | Samples of Product(s) | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Comments:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Title: | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

**Thank you for trusting the Mossy Oak Brand to help grow your Business.**

**[Please fill out the Next Page.]**

|  |  |  |
| --- | --- | --- |
| **Company Name:** | |  |
| **Product Description** | **Fabric / Material Description** | | | **Fabric Supplier or Decorator of Hard Good** | **Decorator Process (If Applicable)** | **Manufacturer (Factory Name)** | **Product Brand Name** | **Wholesale Price** | **MSRP** |
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**Are you interested in use of Mossy Oak® brand in addition to Mossy Oak camo patterns on your products?**  **Yes** **No**

**Please select all Mossy Oak Brand Camo patterns you are interested in:**

Break-Up Country©®

Obsession©® -NWTF

ShadowGrass Blades©®

Shadow Grass ©®-Habitat

Mountain Country©®

Bottomland©®

Treestand©®

Break-Up©® Pink

Blaze©™

Lifestlye patterns

Mossy Oak® Elements® Agua™

Elements©® Terra™

Vintage patterns

OPP patterns

Other – please explain:

Other – please explain:

Other – please explain:

Other – please explain:

Other – please explain:

**For more information regarding Mossy Oak licensing, please visit our website at** [**http://www.mossyoak.com/licensing**](http://www.mossyoak.com/licensing)**.**