



LICENSING APPLICATION



PROPERTY: TV Guide

NAME: _____

ADDRESS: _____

PHONE: _____

FAX: _____

CONTACT: _____

E-MAIL: _____

WEBSITE ADDRESS: _____

List the principal owners of your company:

How long has your company been in business?

Description of Product:

Wholesale Price: (if more than 1 SKU list all prices individually)

Suggested Retail Price: (if more than 1 SKU list all prices individually)

Where will you distribute proposed licensed product: (Please estimate breakdown using percentages.)

Mass: _____

Grocery: _____

Drug: _____

Hobby: _____

Specialty: _____

Club: _____

Direct Response: _____

Internet: _____

Key Target Accounts:

Merchandising: (Describe placement in store, especially any unique secondary or stand-alone activity.)

How will you promote and advertise the proposed licensed products?

What is your advertising/promotion budget for proposed licensed products?

Target consumer:

Estimated sales volume for proposed licensed products:

Year 1: Gross: _____

Net: _____

Year 2: Gross: _____

Net: _____

Proposed Advance: _____

Proposed Minimum Guarantee: _____

Proposed Royalty Rate: _____

Marketing Date:

Ship Date:

Information Provided By: (print) _____

Signature: _____

(Please feel free to supplement this application with additional information, materials and/or samples of products you currently manufacture.)

Thank you for your interest in TV Guide.