

GoSafe Trademark Consent for Use Form

GoSafe has consented forand duration stated below.	to use the GoSafe Logo for the exact purpose
Name:	
Company Name:	
Address:	
Contact Telephone Number:	
E mail address:	
Purpose of use [please indicate]: e.g.	
Where the GoSafe logo will be used:	
Country in which the trademark will be used	•
Duration of time the trademark will be used to	or:

By printing and signing your name below, you are confirming that you will

- Only use the GoSafe logo for the exact uses specified above, and for the specified period.
- Not mislead the public or use the GoSafe logo in any way which is detrimental or inconsistent with the good name, goodwill, reputation and image of GoSafe.
- Cease to use the GoSafe logo at the end of the specified period.

I understand that any changes to use from those stated above will constitute a breach of this agreement, and that authorisation for use of the trademark will cease with immediate effect.

Print Name:			
Signature:			

Please complete this form and return to: lesa.hitchings@swansea.gov.uk or post Lesa Hitchings
Go Safe

PO Box 596 Oystermouth Road Swansea SA1 9HJ