

Request to use Making a Difference Ministries Name, Image, and Logo

Name of Organization or Company: _____

Address: _____

Phone: _____ Website: _____

Contact name: _____ Email address: _____

Reason for this request: _____

How the NIL will be used _____

I/We agree that if this request is approved, that I/We will only use the MAD NIL only in accordance with the "Policy regarding use of MAD Ministries Name, Image, and Logo", and if such approval is rescinded in the future, I/We will remove such use within 30 days.

Signature

Printed Name

Date

----- Official MAD Ministries use below this line -----

This request has been [] Approved [] Disapproved on Date: _____

Notes on this approval: _____

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BOD Members voting for approval:

BOD Members voting against approval:

BOD Members abstaining:

Please return this form to: MAD Ministries, PO Box 159, Brighton, CO 80601