

#### TRADEMARK INTAKE FORM

### YOU'RE ONE STEP CLOSER TO PROTECTING WHAT'S UNIQUELY YOURS!

This Intake Form is designed to give us a clear picture of your vision, your brand, and your goals. To ensure a productive and personalized consultation, please complete and submit the form at least **72 hours** before your scheduled appointment. This allows us the time to carefully review your details and come prepared to support you with intention and focus. Don't stress about having every document or answer upfront. Share what you can now, and we'll guide you through the rest with care and clarity. Your brand deserves protection—let's turn your vision into lasting security!

**DISCLAIMER:** Your privacy matters. Everything you share here is kept strictly confidential and used only to prepare for your consultation. Just a heads-up: completing this form doesn't establish an attorney-client relationship. Our initial meeting is simply a starting point for us to explore your needs—no pressure, no obligations until we both agree to move forward. **A formal agreement must be signed in order to become an OFFICIAL FOREVER LEGAL CLIENT.** 

Today's

Date: How did you hear about FOREVER LEGAL?				
PERSONAL INFORMATION				
What is your full name? [First Name, Middle, Last Name]				
What is your business title?				
Will you be the owner of the Trademark?				
□ Yes □ No				
What is your driver's license number?				
What is your current address? [Street Address or PO Box, City, State, Zip]				
What is your county of residence?				
What is your email address?				
What is your phone number?				
What is your preferred method of contact?				



What is the name of the business? \_\_\_\_\_

# ADDITIONAL OWNER INFORMATION

Is there an addition	onal owner?				
□Yes	□No				
If yes:					
What is their full name? [First Name, Middle, Last Name]					
What is their driv	rer's license number?				
What is their socia	al security number?				
What is their curi	rent address? [Street Address or PO Box, City, State, Zip]				
What is their cour	nty of residence?				
What is their ema	What is their email address?				
What is their pho	ne number?				
What is their pref	ferred method of contact?				
What is their busi	iness title?				
What percentage	of the business do they own?				
Are there any wri	tten contracts between the business partners? [Please upload a copy.]				
□Yes	□No				
If yes, descr	ribe:				
	BUSINESS INFORMATION				
What is the busine	ess address?				
What is the busine	ess phone number?				
If the business is a organized in?	a corporation or LLC, which state is the company incorporated or				



What is the primary purpose of the business:	

#### TRADEMARK INFORMATION

I RADEMARK INFORMATION
What Trademark protection do you need? [Select all that apply.]
□ Name
□ Slogan
□ Logo Design
☐ Other:
<b>Provide a description of the mark</b> [For example: My business name is BEBE's Bonafide Burgers]:
<b>Description of goods and services:</b> [Please use the common commercial or generic names for the goods or services. Be as specific as possible. For example: brick and mortar fast food restaurant service selling burgers, fries, and non-alcoholic beverages.]
Are you currently using the mark?
□ Yes □ No
What specimen samples will you provide? [A specimen is a sample that demonstrates how the mark is used in commerce, i.e., labels, tags, website, menus, brochures, etc.] For more information on specimens read FOREVER LEGAL's Trademark Specimen Information Sheet.
Please identify where you would like to claim protection for this Trademark?
☐ State Protection
☐ Federal Protection
☐ Other:

## ADDITIONAL INFORMATION



Is there additional information you our consultation?	would like FOREVER LEGAL to k	know in advance of
Are there any specific questions yo	u have that should be addressed in o	ur consultation?
C	ERTIFICATION	
I hereby affirm that the information cethe best of my/our knowledge.	contained in this questionnaire is comp	lete and accurate to
Signature	Date	
DO NOT EMAIL	THIS INTAKE F	ORM. TO
ENCLIDE V	OLID INFOR	

DO NOT EMAIL THIS INTAKE FORM. TO ENSURE YOUR INFORMATION REMAINS SECURE UPLOAD YOUR FORM IN MYCASE. THANK YOU!