

COSL Logo Use Application

Send to us at: **Credit Ombudsman Service – Membership**
 Fax: 02 9273 8445 Mail: PO Box A252, Sydney South NSW 1235

Before completing this form, please refer to the 'COSL Logo Use Policy' which sets out the terms and conditions of using the COSL Logo.

Your Information

I am a:

COSL Member >> Member Number

Member Name

Other, please state:

Your contact details

Name Contact Number

Email Address

Your Request

Request type

Print or Television Brochures and Literature

Apparel and/or Merchandise Website/Link

Business cards and Letterheads News / Media / Research

Other, please state:

Intended Use of COSL Logo - Please supply a reason for applying for the use of the COSL logo.

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Please attach a business plan or any other supporting documentation if available

Agreement to Terms and Conditions

I/we agree to be bound by the terms and conditions for logo use as set out in the 'COSL logo use policy', and agree to immediately remove the COSL logo on cessation of membership and/or at the request of COSL. COSL will review your request for logo use and notify you of approval within 10 business days.

Signature Date / / 20

Name

Office Use Only

Approved: Yes No by: on / / 20