

INSTRUCTIONS

The Grief is Love Lost (GILL) licensing agreement is on page 2 of this PDF.

PayPal (paid online)

Please print, complete, sign and return it via email to griefislovelost@gmail.com.

You may also return a hard copy to:

GILL
c/o Eli Zaret Productions
2858 Woodcreek Way
Bloomfield Hills, MI
48304

Paying by Check

If you are paying by check, please send a check for \$399, payable to Eli Zaret Productions, along with the completed licensing agreement to the address above.

Upon receipt of payment and the completed licensing agreement, you will be contacted with instructions and support for getting GILL onto your Website.

Licensing Agreement for Grief is Love Lost LLC (GILL)

This licensing agreement made on the _____ day of _____, 20_____,
is to define the relationship between Grief is Love Lost LLC, (GILL), and _____,
of _____.
Authorized representative
Name of business entity

This agreement is for one year at the rate of \$399 per year and expires on _____,
Today's date
20_____. The fee is due in advance of the activation of GILL's website, griefislovelost.com or
its associated audio files for use by _____
Name of business entity

Further elements of the agreement

- griefislovelost.com is not as public website. Its content (audio files) may not be shared for profit by the licensee. The exposure and use of GILL content is available only to the licensee and its clients.
- GILL content, copyrighted or otherwise, may not be used for profit by the above named MFDA member with any other entity or business regardless of the business category. (For instance, a funeral home may not sell, share or license GILL to a hospice entity just because a particular entity it is not a funeral home.)
- Licensees may not change the appearance or arrangement of GILL content without consent of GILL.
- The licensee will be able to renew its GILL license by submitting payment within one month of expiration of this contract
- Any changes to GILL's licensing fee structure following the completion of this agreement will be provided to licensee within one month of each license expiration date.

Authorized representative

Name: _____ Please print Email Address: _____

Signature: _____ Phone: _____