



Inman Park Neighborhood Association
Trademarked Logo Use
Request Form

INSTRUCTIONS: Please provide the information requested that's above the dotted line.

Date: _____

Requestor's Name: _____

Company Name (if applicable): _____

Requestor's Address: _____

Requestor's Phone Number: _____

Requestor's E-mail Address: _____

Please provide a brief description of the requirement for and intended use of the IPNA logo:

Please send your completed request to:

IPNA Secretary

P.O. Box 5358

Atlanta, GA 31107

secretary@inmanpark.org

(To be filled out by the IPNA Secretary)

Request #: _____ Disposition of Request (Granted / Denied): _____

Usage Restrictions / Expiration Date (as applicable): _____

Board Member Name and Date:
