

MADRID AGREEMENT AND PROTOCOL CONCERNING THE  
INTERNATIONAL REGISTRATION OF MARKS

**APPLICATION FOR INTERNATIONAL REGISTRATION  
GOVERNED EXCLUSIVELY BY THE MADRID PROTOCOL**

(Rule 9 of the Common Regulations)



World Intellectual Property Organization  
34, chemin des Colombettes, P.O. Box 18,  
1211 Geneva 20, Switzerland  
Tel.: (41-22) 338 9111  
Fax (International Trademark Registry): (41-22) 740 1429  
e-mail: [intreg.mail@wipo.int](mailto:intreg.mail@wipo.int) – Internet: <http://www.wipo.int>

**APPLICATION FOR INTERNATIONAL REGISTRATION  
GOVERNED EXCLUSIVELY BY THE MADRID PROTOCOL**

<p style="text-align: center;"><u>For use by the applicant</u></p> <p>This request contains the following number of continuation sheets: .....</p>	<p style="text-align: center;"><u>For use by the applicant/Office</u></p> <p>Applicant's reference: .....</p> <p>Office's reference: .....</p>
--	--

**1** CONTRACTING PARTY WHOSE OFFICE IS THE OFFICE OF ORIGIN

.....

**2** APPLICANT

(a) Name: .....

(b) Address: .....

(c) Address for correspondence: .....

(d) Telephone : ..... Fax: .....

E-mail address: .....

(e) Preferred language for correspondence:       English       French

(f) Other indications (as may be required by certain designated Contracting Parties):

(i) if the applicant is a natural person, nationality of applicant: .....

(ii) if the applicant is a legal entity:

- legal nature of the legal entity: .....

- State and, where applicable, territorial unit within that State, under the law of which the legal entity is organized:

.....

**3** ENTITLEMENT TO FILE

(a) Check the appropriate box(es):

(i)  where the Contracting Party mentioned in item 1 is a State, the applicant is a national of that State; or

(ii)  where the Contracting Party mentioned in item 1 is an organization, the name of the State of which the applicant is a national: .....; or

(iii)  the applicant is domiciled in the territory of the Contracting Party mentioned in item 1; or

(iv)  the applicant has a real and effective industrial or commercial establishment in the territory of the Contracting Party mentioned in item 1.

(b) Where the address of the applicant, given in item 2(b), is not in the territory of the Contracting Party mentioned in item 1, indicate in the space provided below:

(i) if the box in paragraph (a)(iii) of the present item has been checked, the domicile of the applicant in the territory of that Contracting Party, or,

(ii) if the box in paragraph (a)(iv) of the present item has been checked, the address of the applicant's industrial or commercial establishment in the territory of that Contracting Party.

.....  
.....

**4** APPOINTMENT OF A REPRESENTATIVE (if any)

Name: .....

Address: .....

.....

Telephone: ..... Fax: .....

E-mail address: .....

**5** BASIC APPLICATION OR BASIC REGISTRATION

Basic application number: ..... Date of the basic application: ..... (dd/mm/yyyy)

Basic registration number: ..... Date of the basic registration: ..... (dd/mm/yyyy)

**6** PRIORITY CLAIMED

The applicant claims the priority of the earlier filing mentioned below:

Office of earlier filing: .....

Number of earlier filing (if available): .....

Date of earlier filing: ..... (dd/mm/yyyy)

If the earlier filing does not relate to all the goods and services listed in item 10 of this form, indicate in the space provided below the goods and services to which it does relate:

.....

.....

If several priorities are claimed, check box and use a continuation sheet giving the above required information for each priority claimed.

**7** THE MARK

(a) Place the reproduction of the mark, as it appears in the basic application or basic registration, in the square below.

(b) Where the reproduction in item (a) is in black and white and color is claimed in item 8, place a color reproduction of the mark in the square below.

(c)  The applicant declares that he wishes the mark to be considered as a mark in standard characters.

(d)  The mark consists of a color or a combination of colors as such.

Where the Office of origin has addressed this form by telefacsimile, the present space must be completed before addressing the original of this page to the International Bureau.

Number of basic application or registration or Office reference as shown on the first page of this form:

.....

Signature by the Office of origin: .....

**8**

**COLOR(S) CLAIMED**

(a)  The applicant claims color as a distinctive feature of the mark.

Color or combination of colors claimed: .....  
.....  
.....

(b) Indication, for each color, of the principal parts of the mark that are in that color (as may be required by certain designated Contracting Parties):

.....  
.....  
.....

**9**

**MISCELLANEOUS INDICATIONS**

(a) Transliteration of the mark (this information is compulsory where the mark consists of or contains matter in characters other than Latin characters, or numerals other than Arabic or Roman numerals):

.....  
.....

(b) Translation of the mark (as may be required by certain designated Contracting Parties):

(i) into English: .....  
.....

(ii) into French: .....  
.....

(c)  The words contained in the mark have no meaning (and therefore cannot be translated).

(d) Where applicable, check the relevant box or boxes below:

- Three-dimensional mark
- Sound mark
- Collective mark, certification mark, or guarantee mark

(e) Description of the mark (where applicable):

.....  
.....

(f) Verbal elements of the mark (where applicable):

.....  
.....

(g) The applicant declares that he wishes to disclaim protection for the following element(s) of the mark:

.....  
.....  
.....



**11**

**DESIGNATED CONTRACTING PARTIES**

Check the corresponding boxes:

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> <b>AG</b> Antigua and Barbuda  | <input type="checkbox"/> <b>GB</b> United Kingdom <sup>1</sup>           | <input type="checkbox"/> <b>MN</b> Mongolia                              |
| <input type="checkbox"/> <b>AL</b> Albania              | <input type="checkbox"/> <b>GE</b> Georgia                               | <input type="checkbox"/> <b>MZ</b> Mozambique                            |
| <input type="checkbox"/> <b>AM</b> Armenia              | <input type="checkbox"/> <b>GR</b> Greece                                | <input type="checkbox"/> <b>NO</b> Norway                                |
| <input type="checkbox"/> <b>AN</b> Netherlands Antilles | <input type="checkbox"/> <b>HU</b> Hungary                               | <input type="checkbox"/> <b>PL</b> Poland                                |
| <input type="checkbox"/> <b>AT</b> Austria              | <input type="checkbox"/> <b>IE</b> Ireland <sup>1</sup>                  | <input type="checkbox"/> <b>PT</b> Portugal                              |
| <input type="checkbox"/> <b>AU</b> Australia            | <input type="checkbox"/> <b>IS</b> Iceland                               | <input type="checkbox"/> <b>RO</b> Romania                               |
| <input type="checkbox"/> <b>BG</b> Bulgaria             | <input type="checkbox"/> <b>IT</b> Italy                                 | <input type="checkbox"/> <b>RU</b> Russian Federation                    |
| <input type="checkbox"/> <b>BT</b> Bhutan               | <input type="checkbox"/> <b>JP</b> Japan                                 | <input type="checkbox"/> <b>SE</b> Sweden                                |
| <input type="checkbox"/> <b>BX</b> Benelux              | <input type="checkbox"/> <b>KE</b> Kenya                                 | <input type="checkbox"/> <b>SG</b> Singapore <sup>1</sup>                |
| <input type="checkbox"/> <b>BY</b> Belarus              | <input type="checkbox"/> <b>KP</b> Democratic People's Republic of Korea | <input type="checkbox"/> <b>SI</b> Slovenia                              |
| <input type="checkbox"/> <b>CH</b> Switzerland          | <input type="checkbox"/> <b>KR</b> Republic of Korea                     | <input type="checkbox"/> <b>SK</b> Slovakia                              |
| <input type="checkbox"/> <b>CN</b> China                | <input type="checkbox"/> <b>LI</b> Liechtenstein                         | <input type="checkbox"/> <b>SL</b> Sierra Leone                          |
| <input type="checkbox"/> <b>CU</b> Cuba                 | <input type="checkbox"/> <b>LS</b> Lesotho                               | <input type="checkbox"/> <b>SZ</b> Swaziland                             |
| <input type="checkbox"/> <b>CY</b> Cyprus               | <input type="checkbox"/> <b>LT</b> Lithuania                             | <input type="checkbox"/> <b>TM</b> Turkmenistan                          |
| <input type="checkbox"/> <b>CZ</b> Czech Republic       | <input type="checkbox"/> <b>LV</b> Latvia                                | <input type="checkbox"/> <b>TR</b> Turkey                                |
| <input type="checkbox"/> <b>DE</b> Germany              | <input type="checkbox"/> <b>MA</b> Morocco                               | <input type="checkbox"/> <b>UA</b> Ukraine                               |
| <input type="checkbox"/> <b>DK</b> Denmark              | <input type="checkbox"/> <b>MC</b> Monaco                                | <input type="checkbox"/> <b>US</b> United States of America <sup>2</sup> |
| <input type="checkbox"/> <b>EE</b> Estonia              | <input type="checkbox"/> <b>MD</b> Republic of Moldova                   | <input type="checkbox"/> <b>YU</b> Serbia and Montenegro                 |
| <input type="checkbox"/> <b>ES</b> Spain                | <input type="checkbox"/> <b>MK</b> The former Yugoslav Rep. of Macedonia | <input type="checkbox"/> <b>ZM</b> Zambia                                |
| <input type="checkbox"/> <b>FI</b> Finland              |  |  |
| <input type="checkbox"/> <b>FR</b> France               |  |  |

Others: .....

- <sup>1</sup> By designating **Ireland**, **Singapore** or the **United Kingdom**, the applicant declares that he has the intention that the mark will be used by him or with his consent in that country in connection with the goods and services identified in this application.
- <sup>2</sup> If the **United States of America** is designated, it is compulsory to annex to the present international application the official form (MM18) containing the declaration of intention to use the mark required by this Contracting Party.

**12**

**SIGNATURE BY THE APPLICANT OR HIS REPRESENTATIVE**  
(if required or allowed by the Office of origin)

..... (dd/mm/yyyy)

**13**

**CERTIFICATION AND SIGNATURE OF THE INTERNATIONAL APPLICATION BY THE OFFICE OF ORIGIN**

(a) Certification

The Office of origin certifies

- (i) that the request to present this application was received on ..... (dd/mm/yyyy).
- (ii) that the applicant named in item 2 is the same as the applicant named in the basic application or the holder named in the basic registration mentioned in item 5, as the case may be,  
that any indication given in item 8(c), 9(d) or 9(e) appears also in the basic application or the basic registration, as the case may be,  
that the mark in item 7(a) is the same as in the basic application or the basic registration, as the case may be,  
that, if color is claimed as a distinctive feature of the mark in the basic application or the basic registration, the same claim is included in item 8 or that, if color is claimed in item 8 without having being claimed in the basic application or basic registration, the mark in the basic application or basic registration is in fact in the color or combination of colors claimed, and  
that the goods and services listed in item 10 are covered by the list of goods and services appearing in the basic application or basic registration, as the case may be.

Where the international application is based on two or more basic applications or basic registrations, the above declaration shall be deemed to apply to all those basic applications or basic registrations.

(b) Office's signature: .....

Date of signature: ..... (dd/mm/yyyy)

**FEE CALCULATION SHEET**

(a) INSTRUCTIONS TO DEBIT FROM A CURRENT ACCOUNT

The International Bureau is hereby instructed to debit the required amount of fees from a current account opened with the International Bureau (if this box is checked, it is not necessary to complete (b)).

Holder of the account: ..... Account number: .....

Identity of the party giving the instructions: .....

(b) AMOUNT OF FEES; METHOD OF PAYMENT

Basic fee (653 Swiss francs if the reproduction of the mark is in black and white only; 903 Swiss francs if there is a reproduction in color) .....

Complementary and supplementary fees:

Number of designations for which complementary fee is applicable		Complementary fee		Total amount of the complementary fees	
.....	x	73 Swiss francs	=	.....	=> .....

Number of classes of goods and services beyond three		Supplementary fee		Total amount of the supplementary fees	
.....	x	73 Swiss francs	=	.....	=> .....

Individual fees (Swiss francs):

Designated Contracting Parties	Individual fee	Designated Contracting Parties	Individual fee
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....

Total individual fees => .....

**Grand total (Swiss francs)** .....

Identity of the party effecting the payment: .....

Payment received and acknowledged by WIPO	<input type="checkbox"/>	WIPO receipt number	.....
Payment made by banker's cheque (attached)	<input type="checkbox"/>	Cheque identification	dd/mm/yyyy
Payment made by banker's cheque (sent separately)	<input type="checkbox"/>	Cheque identification	dd/mm/yyyy
Payment made to WIPO bank account No. CH35 0425 1048 7080 8100 0 Credit Suisse, CH-1211 Geneva 70 Swift: CRESCH ZZ12A	<input type="checkbox"/>	Payment identification	dd/mm/yyyy
Payment made to WIPO postal cheque account N° 12-5000-8, Geneva	<input type="checkbox"/>	Payment identification	dd/mm/yyyy

