



Avid Technology, Inc.
Avid Technology Park
One Park West
Tewksbury, MA 01876 USA

License Transfer Form

Professional Film/Video Systems

Instructions

Completion of this form and payment of all applicable transfer fees (listed at <http://www.avid.com/register/transfer.asp>) are required to transfer license ownership of your Avid Technology, Inc. professional film/video system(s). This form may only be used for transfers within the United States, Canada and Latin America. Authorized signatures are required from both the party relinquishing the license (the Transferor) and the party receiving the license (the Transferee). If you have any questions about this form (including what to do if the Transferor is unavailable for signature), please contact Avid by telephone at 978-640-3494 or by email at software_transfers@avid.com.

Part I: Transferred Software Products

The Transferor shall transfer license ownership of the software product(s) listed below to the Transferee (attach additional pages as necessary). You can find the System ID and Serial/Dongle Number for each software product on the tag attached to the purple USB dongle. Indicate by checkmark in the last column if the Transferor has a current support contract with Avid for the software product and such support is also being transferred to the Transferee.

Product Name (please print)	Version No.	System ID	Serial/Dongle Number	Transferring Support?
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No

Date of proposed transfer: _____

Part II: To Be Completed by Transferor

I am the current licensee of the software product(s) identified in Part I. I am transferring to the Transferee identified in Part III all rights that I possess with respect to the software product(s) and, to the extent set forth in Part I, the corresponding Avid support. I will not retain any copy of the software product(s) (including any prior versions or upgrades) hereafter. The Transferee has agreed in writing, as a condition to the license transfer, to be bound by the Avid End User License Agreement included with each software product. I understand and agree that by signing and submitting this form, I am relinquishing all rights to the software product(s) and, to the extent set forth in Part I, the corresponding Avid support, and my name will be removed from Avid's customer records with respect thereto. If this Part II is being completed on behalf of a company or other entity, I represent and warrant that I have the authority to sign this Part II on its behalf.

Name of Transferor (please print)			
Contact Name (if Transferor is a company or other entity)		Contact Title	
Street Address 1			
Street Address 2			
City	State/Province	Country	ZIP/Postal Code
Telephone	Facsimile	Email	
Authorized Signature		Date	
Print Name		Title	

Part III: To Be Completed by Transferee

I acknowledge receipt of the software product(s) identified in Part I. By signing and submitting this form, (i) I confirm that I have read the Avid End User License Agreement included with each software product and that I agree to be bound by the terms and conditions set forth therein, (ii) I acknowledge that Avid will invoice me at the address set forth below for the applicable transfer fee(s) (listed at <http://www.avid.com/register/transfer.asp>) and I agree to pay such fee(s) within forty-five (45) days of the invoice date, (iii) I acknowledge and agree that the period of any warranty set forth in the Avid End User License Agreement shall not be extended or reset by reason of the license transfer or otherwise, and (iv) I acknowledge and agree that any Avid support transferred to me, as set forth in Part I, will be provided in accordance with Avid's standard support policies (described at <http://www.avid.com/support/>). If this Part III is being completed on behalf of a company or other entity, I represent and warrant that I have the authority to sign this Part III on its behalf.

Name of Transferee (please print)			
Contact Name (if Transferee is a company or other entity)		Contact Title	
Street Address 1			
Street Address 2			
City	State/Province	Country	ZIP/Postal Code
Telephone	Facsimile	Email	
Do you own any other Avid systems? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Which industry best describes your business?		<input type="checkbox"/> AAEC/ETC	<input type="checkbox"/> Animation/Graph/Effs
<input type="checkbox"/> Audio	<input type="checkbox"/> Broadcast	<input type="checkbox"/> Consumer	<input type="checkbox"/> Corporate Video
<input type="checkbox"/> Education	<input type="checkbox"/> Federal Government	<input type="checkbox"/> Medical	<input type="checkbox"/> State & Local
<input type="checkbox"/> Subsidiary	<input type="checkbox"/> TV/Film	<input type="checkbox"/> Other	
Authorized Signature		Date	
Print Name		Title	

As described in Avid's Privacy Policy (available at <http://www.avid.com/legal/index.html>), the information you provide on this form will be used to record your ownership of the software product(s) and to contact you with information relevant to the software product(s), such as maintenance information, updates or new product releases. Avid does not, without your permission, sell to third parties information you have submitted that identifies you personally. Please review the Privacy Policy for more information.

Consent for Additional Information

Avid respects your privacy and your time and does not intend to inundate you with unsolicited information. Occasionally, Avid (or its subsidiaries and divisions) has special information or offers that might interest you. If you would like to receive such special information or offers, please indicate your consent below.

- ☐ Yes, I would like to receive periodic information about Avid's special offers and new products. I would also like to receive information regarding other topics you think might interest me as an Avid customer. That information may be sent to me using the information I provided, including my e-mail address.

Occasionally, Avid is aware of selected companies whose products complement ours or who otherwise have information or offers that might be of interest to our customers. If you would like to hear from those companies, indicate your consent below to have those companies use the information you provided to contact you directly.

- ☐ Yes, I would like to receive periodic information about Avid's special offers and new products. I would also like to receive information regarding other topics you think might interest me as an Avid customer. That information may be sent to me using the information I provided, including my e-mail address.

You may unsubscribe from these lists at any time. Information about how to unsubscribe is available either from the information provided to you or from the Avid website at www.avid.com.

**Please send completed form
(both pages 1 and 2) to:**

Avid Technology, Inc.
Avid Technology Park
One Park West
Tewksbury, MA 01876 USA
Attention: Software License Transfers

Or fax to:

Avid Technology, Inc.
978-548-4642
Attention: Software License Transfers