CONFIDENTIAL INFORMATION FORM

The first step is to complete and return this document. To expedite you may e-mail or fax. Although you may submit supporting documents, we only require the basics at this point.

U.S. & Canada Phone and Fax: 877.857.0070

U.K. Phone and Fax: 171.691.7777 Australia Phone/Fax: 29.475.0777

I-Launcher and its affiliates hereby agree that the product concept, idea, or invention being submitted within this "Confidential Information Form" shall not be disclosed, sold or assigned to any corporation, or individual without the expressed written permission of the inventor whose signature appears below.

Inventor's Name Mr./Mrs./Ms		Co-Inventor		
Address				
Home	Work	Mobile	Fax	
What is the best time	e to reach you by telephon	e at home? FromT	To Work? From	To
E-Mail Address (if	available)			
Inventor's Signature		Co-Inventor's Signature		
Re	ecord and Dis	closure of Pro	oduct Concept	-
This Record of a pro	oduct concept, idea, or inve	ention acknowledges (print	name)	
as having conceived (name of idea)			, on the (original date of concepti	
(Da	ate: mm/dd/yyyy), and dis	closing the aforementione	ed to I-Launcher and its at	ffiliates.
Witness		Witness		

"Exposing New Product Concepts To A World Of Possibilities"

Graphic				
Within the space provided below please draft a <i>rough sketch</i> highlighting the major components of your idea. You may submit any additional graphics on separate paper.				
Description				
In the space provided and on any additional pages that you would like to add please provide the details of your invention. Be sure to clearly state what the product is , what it does , and how it works as well as any features or benefits . (Please type or print using black ink)				
Is the Product Patented? Yes No Patent Pending? Yes No				
What type of store would distribute the product? Price? \$				
What materials could be used for manufacturing? (Plastic, Metal, Wood)				