

International Dairy Foods Association Live and Active Cultures Seal Application

A separate application must be completed for each product line. For non-Members of IDFA, each application must be accompanied by a nonrefundable fee of \$5000 per product line payable to the International Dairy Foods Association.

Company: _____

Address: _____ **Phone:** _____
_____ **Fax:** _____
_____ **Email:** _____

Are a producer and/or distributor of yogurt in the United States? Yes ____ No ____

Product: _____

Shelf life of product: _____

List other brands name(s) of product, if marketed under more than one name:

Were the required analytical tests conducted in accordance with the protocols set forth in Appendix A of the IDFA Seal Program Procedures? _____ (Please attach test results.)

Were the analytical tests conducted by a state or USDA-certified independent laboratory? ____ Laboratory

Contact Information:

Name/Contact: _____
Address: _____

All applications, attachments, test results, record of any action by the Seal Program Staff, renewal forms, etc. will be provided to any member of the public upon written request.

If IDFA approves the application, the company ("the licensee") agrees to hold IDFA ("the licensor") harmless; and to defend at licensee's expense, all actions arising out of the licensee's use of the IDFA Seal on a product that does not contain the levels of live and active cultures specified by licensor for use of the seal, provided that licensee fraudulently or negligently misrepresented the levels of live and active cultures in the product identified in this application or otherwise misrepresented any material fact.

The licensee shall indemnify the licensor against all judgments, fines, amounts paid in settlement, and reasonable expenses including attorney's fees, as actually and necessarily incurred by licensor in connection with such action, suit, investigation or proceeding or in connection with any appeal therein.

By signing this application, you certify that the product was tested by the above named laboratory and that the results of the test were in compliance with the guidelines set forth in Appendix A of the IDFA Seal Program Procedure.

Signature: _____ **Date:** _____

Name: _____ **Title:** _____