APPLICATION FORM FOR MARKETING OF FOOD &



Please print/fill in the information in CAPITAL LETTERS.

	CLIENT'S DETAILS	
Name of company:		SIGNATURE
Name of contact person:		
Identification Number:		Company's stamp
Address of the company:		
		Date of application:
Email address contact person:		Contact no:
Company email:		Office no:

PRODUCT(S) DETAILS (please attach a draft of the proposed advertisement and details of the nutrient contents of food and beverages that will be advertised)							
Date of production:							
Duration of advertisement/marketin g:							
Platform of advertisement/marketi ng (may choose more than 1):	Billboard Newspaper	LED Panel	Poster				
	Television	Radio	Magazine	Cinema			
	Others, please specify:						

For advertisement/ marketing on printed media, including digital media (if applicable): Note: Please attach the map of the location and a photo of the location (if applicable)	Location(s): 1. 2. 3.
For air-time radio or TV advertisement/marketi ng: (if applicable)	Please append details of the advertisement on the respective platforms, such as air-time, day, and name of the channel.

For TV tickers or pop up/advertisements (if applicable)	Yes	No	
Name of Cinemas (If applicable):	1. 2. 3. 4. 5.		

-Thank you, and appreciate your support-