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-