APPLICATION FORM FOR MARKETING OF FOOD & BEVERAGES TO CHILDREN



Please print/fill in information in CAPITAL LETTERS

CLIENT'S DETAILS					
Name of company:		CICNATURE			
Name of contact person:		SIGNATURE			
Identification Number:		Company's stamp			
Address of company:					
		Date of application:			
Email address contact person:		Contact no:			
Company email:		Office no:			
PRODUCT(S) DETAILS (please attach draft of proposed advertisement)					
Date of production:					
Duration of					
advertisement/marketing:					
Platform of advertisement/marketing					
(may choose more than 1):	Television Newspaper	Magazine Cinema			
	Others, please specify:	thers, please specify:			
Air-time for radio and TV advertisement/marketing: (if applicable)					

For TV advertisement/ marketing, does it appear as TV tickers or pop up? (if applicable)	Yes	☐ No	
Location(s) of advertisement/ marketing (if applicable): Note: please attached the map of location and photo of location.	1. 2. 3.		
Details of nutrient contents of food and beverages that will be advertised			

-Thank you and appreciate your support-