|  | | | | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| media representatives appliCATION FORM Please fill out a separate application for each media representative company you wish to get listed. If you have any questions, please contact [cardonline@strategyonline.ca](mailto:cardonline@strategyonline.ca). | | | | | | | | | | | |
| \*required Field  APPLICANT Information  (Please provide contact details of the individual who will update the listing content) | | | | | | | | | | | |
| \*Name: | | | | | \*Title: | | | | | | |
| \*Email: | | | | | \*Phone: | | | | | | |
| \*Company name: | | | | | | | | | | | |
| General Information | | | | | | | | | | | |
| \*Owned By: | | | | | | | | | | | |
| \*Main Address: | | | | | | | | | | | |
| \*Phone: | | | Toll free: | | | | | \*Email: | | | |
| Website(s): http:// | | | | | | | | | | | |
|  | | | | | | | | | | | |
| \*Year established: | | | | | | | | | | | |
| \*Primary area of expertise: Choose an item. | | | | | | | | | | | |
| Secondary area(s) of expertise (check all that apply):  Campus Newspaper  Community Newspapers/Daily Newspapers/Shoppers  Digital Media  Ethnic/Multicultural Media  Radio  Television  Consumer Magazines  Business/Trade Publications  Other | | | | | | | | | | | |
| Media Association memberships: | | | | | | | | | | | |
| PROFILE | | | | | | | | | | | |
| \*Provide a description for your company – **MAX. 50 WORDS** – your profile serves as a quick brand orientation for users; avoid using promotional phrases, such as “award winning…”: | | | | | | | | | | | |
| Personnel to display in listing | | | | | | | | | | | |
| \*Name: | | | | | | \*Title: | | | | | |
| \*Email: | | | | | | \*Phone: | | | | | |
| \*Job function  (check all that apply) | | Executive  Production | | | | Sales  Administrative  Other | | | | | |
| \*Name: | | | | | | \*Title: | | | | | |
| \*Email: | | | | | | \*Phone: | | | | | |
| \*Job function  (check all that apply) | | Executive  Production | | | | Sales  Administrative  Other | | | |  | |
| \*Name: | | | | | | \*Title: | | | | | |
| \*Email: | | | | | | \*Phone: | | | | | |
| \*Job function  (check all that apply) | | Executive  Production | | | | Sales  Administrative  Other | | | |  | |
| \*Name: | | | | | | \*Title: | | | | | |
| \*Email: | | | | | | \*Phone: | | | | | |
| \*Job function  (check all that apply) | | Executive  Production | | | | Sales  Administrative  Other | | | |  | |
| \*Name: | | | | | | \*Title: | | | | | |
| \*Email: | | | | | | \*Phone: | | | | | |
| \*Job function  (check all that apply) | | Executive  Production | | | | Sales  Administrative  Other | | | |  | |
| \*Name: | | | | | | \*Title: | | | | | |
| \*Email: | | | | | | \*Phone: | | | | | |
| \*Job function  (check all that apply) | | Executive  Production | | | | Sales  Administrative  Other | | | |  | |
| Branch office(s)  (If you have more than one branch office please include in a separate document) | | | | | | | | | | | |
| Address: | | | | | | | | | | | |
| Phone: | | | | Toll free: | | | | | Email: | | |
| Contact name: | | | | | | | | | | | |
| Title: | | Phone: | | | | Email: | | | | | |
| \*Job function  (check all that apply) | | Executive  Production | | | | Sales  Administrative  Other | | | | | |
| REPRESENTED MEDIA BRANDS | | | | | | | | | | | |
| \*Media Name: | Contact’s Name | | | | | | Phone: | | | | Email: |
| \*Media Name: | Contact’s Name | | | | | | Phone: | | | | Email: |
| \*Media Name: | Contact’s Name | | | | | | Phone: | | | | Email: |
| \*Media Name: | Contact’s Name | | | | | | Phone: | | | | Email: |
| \*Media Name: | Contact’s Name | | | | | | Phone: | | | | Email: |
| \*Media Name: | Contact’s Name | | | | | | Phone: | | | | Email: |
| \*Media Name: | Contact’s Name | | | | | | Phone: | | | | Email: |

**Applicant’s Electronic Acknowledgement:**

By submitting the above, I hereby acknowledge that the information provided is true and agree to have this listing

published by CARDonline. In addition, on request by any bona fide advertisers, or by an advertising agency having recognition, we hereby agree to submit records from which the figures were prepared.

|  |  |
| --- | --- |
| Name: | Date: |