

Advertising Services Supplier Registration Update Form 2021

Email a completed registration package to commtenders@gov.sk.ca.
Please be sure to attach completed reference check forms and any additional pages as needed.

Legal Business/Company Name:

Division of:

Head Office Address:

City:

Province:

Postal Code:

Phone:

Primary Contact Name:

Email Address

Website:

Date your company was established:

Branch office(s) location(s):

Approximate company revenue (past four years):

| | | | |
|------|-------------|------|-------------|
| Year | Amount (\$) | Year | Amount (\$) |
| Year | Amount (\$) | Year | Amount (\$) |

Accredited by these organizations:

Canadian Business Press

Canadian Community Newspaper

Association Institute of Canadian Advertising

Other, please specify:

Membership in these organizations:

Graphic Designers of Canada

Design Council of Saskatchewan

Canadian Public Relations Society

Advertising Agency Association of Sask.

International Association of Business

Communicators IAB Canada

Other, please specify:

Subscriptions to:

Bureau of Broadcast Measurement

Print Measurement Bureau

Nadbank

ComBase

COMB

comScore

Other, please specify:

Media Information Management System used:

Donavan Data Systems

Not Applicable

AdTraq

Other, please specify:

Nadbank

Silent Partner

Fuimus

Advertising Agency Services:

Please identify the in-house core services your agency provides as well as any additional or other services:

Core:

Account Planning and Service

Production Project Management

Strategic Communications Planning

Creative Conceptualization

Copywriting

Graphic Design/Layout

Media Planning/Negotiating/Purchasing

Accounting and Planning

Additional:

Promotional

Items Market

Research

Brand Strategy

Interactive

Other, please specify

Media Buying:

Please identify the in-house core services your agency provides as well as any additional or other services:

Core:

TV and Radio Planning and Buying

Digital Planning and Buying

Print and out of Home Planning and Buying

Broadcast Trafficking and Material

Management Reconciliation of Buys, Pre and Post Analysis

Strategic Media Counsel

Media Audits

Additional:

Other, please specify

Is your firm affiliated (legal or informal) with any other companies? If so, please identify the firms and the nature of the affiliation.

| Names of Principal Shareholders/Partners | Responsibilities |
|--|------------------|
| | |
| | |
| | |

Employees (owners/partners/contractors are not to be included):

Number of full-time staff:

Number of part-time staff:

Names and specific responsibilities of principal shareholders/partners:

| Name | Responsibilities |
|------|------------------|
| | |
| | |
| | |

Please disclose any relationships between partners and client list.

| Partner | Client | Relationship |
|---------|--------|--------------|
| | | |
| | | |
| | | |

Identify clients you have acquired in the past year:

Identify client you have lost in the past year:

| Client | Reason |
|--------|--------|
| | |
| | |
| | |

Additional Information:

Authorization of data:

I/We wish to register my/our company as a potential supplier of goods and/or services to the Government of Saskatchewan.

I/We certify that the information contained in this registration form is correct and current.

I/We further certify that my/our company shall comply with the provisions of the Purchasing Act of Saskatchewan, and its attendant Purchasing Agency Operating Regulations.

I/We certify that my/our company will comply with the policies required by Communications Services.

I/We certify that neither the applicant nor any persons (or concerns) have any connection with the applicant as a principal or officer, so far as known, and is not deterred or otherwise declared ineligible by any public agency from bidding or furnishing materials, supplies or services to a public sector agency thereof.

I confirm that the information provided in this registration is accurate to the best of my knowledge.

Submitted/Prepared by:

Name of Authorized Principal:

Date: