

MARKETING CLIENT INTAKE FORM

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COMPANY NAME

CLIENT'S FULL NAME

EMAIL ADDRESS

PHONE NUMBER

JOB TITLE

JOB RESPONSIBILITIES

COMPANY WEBSITE URL

SOCIAL MEDIA PLATFORMS

COMPANY DESCRIPTION

DESCRIBE YOUR BUSINESS'S PRIMARY PRODUCTS AND/OR SERVICES:

STATE YOUR COMPANY GOALS:

SELECT YOUR PRIMARY TARGET AGE GROUP(S):

13-18 YEARS OF AGE <input type="checkbox"/>	18-23 YEARS OF AGE <input type="checkbox"/>	23-30 YEARS OF AGE <input type="checkbox"/>	30-45 YEARS OF AGE <input type="checkbox"/>	45-60 YEARS OF AGE <input type="checkbox"/>	60+ YEARS <input type="checkbox"/>
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WHAT PLATFORM HOSTS YOUR COMPANY WEBSITE?

WHICH ADVERTISING PLATFORMS DOES YOUR COMPANY UTILIZE?

WHO ARE YOUR PRIMARY COMPETITORS?

WHAT IS YOUR MONTHLY BUDGET FOR ADVERTISING AND DIGITAL MARKETING?

WHICH SELLING PLATFORMS DO YOU USE?

HOW CLOSE IS YOUR COMPANY TO ACHIEVING ITS STATED GOALS?

WHAT ARE YOUR PRIMARY MARKETING GOALS?

INCREASE MARKET SHARE <input type="checkbox"/>	INCREASE REVENUE <input type="checkbox"/>	EXPAND CUSTOMER BASE <input type="checkbox"/>	GROW ACCOUNTS <input type="checkbox"/>	IMPROVE SEARCH ENGINE RANKING <input type="checkbox"/>	OTHER <input type="checkbox"/>
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WHAT SERVICES ARE YOU SEEKING?

CONTENT MARKETING <input type="checkbox"/>	WEBSITE DESIGN <input type="checkbox"/>	SEARCH ENGINE OPTIMIZATION <input type="checkbox"/>	BRAND DEVELOPMENT <input type="checkbox"/>	SOCIAL MEDIA MARKETING <input type="checkbox"/>	PAY PER CLICK/ SEM <input type="checkbox"/>
DIGITAL STRATEGY <input type="checkbox"/>	LEAD GENERATION <input type="checkbox"/>	MOBILE MARKETING <input type="checkbox"/>	EMAIL CAMPAIGNS <input type="checkbox"/>	LANDING PAGE OPTIMIZATION <input type="checkbox"/>	OTHER <input type="checkbox"/>

TARGET START DATE

TARGET COMPLETION DATE

MM/DD/YY	MM/DD/YY
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ESTIMATED BUDGET FOR THIS PROJECT

ADDITIONAL REQUIREMENTS OR COMMENTS

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