Consent Information Form Kolok Marketing KOL Customer Name: For Office Use: Kolok Account #: Contact Name: Company Name: Captured by: Designation: _____ Date: Physical Address: I consent to receive updates on products and promotions via Email from Kolok Please provide the below information for other contacts within your business that require promotional

	Email 1	Email 2	Email 3	Email 4	Landline Number	Mobile Number
Marketing						
Marketing						

information on our products.