

To register, complete sections A or B below, then sign and date and return the form to the address shown overleaf or fax to 01293 610310

YOUR DETAILS – PLEASE USE BLOCK CAPITALS

Mr/Mrs/Ms/Miss _____ First Name _____ Surname _____
 Job Title _____ Company/Shop Name _____
 Business Address _____
 _____ Postcode _____
 Tel _____ Fax _____
 E-mail _____

PLEASE COMPLETE SECTIONS A OR B DEPENDING ON YOUR WORK LOCATION

A – ON-LICENSED OUTLET

1) Which best describes your business?
 01 Pub 02 Hotel 03 Restaurant
 04 Style Bar 05 Night Club 06 Sports Bar
 07 Social Club 08 Restaurant Bar 09 Hotel Bar
 10 Other _____

2) Is Your Premises Licensed?
 11 Yes 12 No

3) Is Your Establishment?
 13 Freehold 14 Leasehold 15 Tenanted
 16 Managed 17 Other _____

4) What is your annual turnover?
 18 Less than £100,000 19 £100,000 to £200,000 20 £200,000 to £400,000
 21 £400,000 to £600,000 22 £600,000 to £1,000,000 23 More than £1,000,000
 24 Don't Know

5) What is your annual barrellage?
 25 Less than 50 26 51 – 199 27 200 – 299
 28 300 – 499 29 500 – 1000 30 1000 or more
 31 Don't Know

6) Which alcoholic drinks do you serve for consumption on the premises?
A. Please tick all drinks served for consumption on the premise
B. Please rank top 3 in order of sales

A	B	
32 <input type="checkbox"/>	48 <input type="checkbox"/>	Draught Lager
33 <input type="checkbox"/>	<input type="checkbox"/>	Draught Premium Lager
34 <input type="checkbox"/>	<input type="checkbox"/>	Draught Standard Bitter
35 <input type="checkbox"/>	<input type="checkbox"/>	Draught Premium Bitter
36 <input type="checkbox"/>	<input type="checkbox"/>	Nitro Keg Bitter
37 <input type="checkbox"/>	<input type="checkbox"/>	Bottled Lager
38 <input type="checkbox"/>	<input type="checkbox"/>	Premium Bottled Lager
39 <input type="checkbox"/>	<input type="checkbox"/>	Speciality Beer
40 <input type="checkbox"/>	<input type="checkbox"/>	Premium Packaged Spirits (ie. Alcopops)
41 <input type="checkbox"/>	<input type="checkbox"/>	Wine
42 <input type="checkbox"/>	<input type="checkbox"/>	Spirits
43 <input type="checkbox"/>	<input type="checkbox"/>	Premium Spirits
44 <input type="checkbox"/>	<input type="checkbox"/>	Shooters
45 <input type="checkbox"/>	<input type="checkbox"/>	Cocktails
46 <input type="checkbox"/>	<input type="checkbox"/>	Hot Beverages
47 <input type="checkbox"/>	<input type="checkbox"/>	Soft Drinks

7) For the following product categories, how wide is the choice available to you? (choose from options A-F)
 A Tied with a narrow range of products
 B Tied with a medium range of products
 C Tied with wide range of products
 D All decisions made by Head Office
 E All decisions made by Head Office but in conjunction with you
 F All decisions made by you

49 Draught Lager 50 Other Alcoholic Drinks 51 Soft Drinks
 52 Food 53 Equipment

8) Do you offer any of the following?
 54 Fruit Machines 55 SWP Machines 56 TV Sport
 57 Darts 58 Pool 59 Dance Facilities
 60 Live Entertainment 61 Karaoke 62 Childrens' Facilities
 63 Garden 64 Function Room 65 Games Room
 66 Cash Machine

9) Do you serve food for consumption on the premises?
 67 Yes 68 No

10) Where is it consumed?
 69 Incorporated in Bar Area 70 Separate Bar Area 71 Separate Dining Area

B – HEAD OFFICE/REGIONAL OFFICE

11) Which best describes your business?
 72 Brewer 73 Pub/Venue Operator 74 Hotel Chain
 75 Wholesaler/Cash & Carry

12) Which best describes your job function?
 76 Marketing 77 Operations 78 General Management
 79 Sales 80 Purchasing 81 IT
 82 Finance 83 Property 84 Human Resources
 85 Other (please specify) _____

13) Do you have purchasing authority/influence for the following?

86 <input type="checkbox"/>	Draught Standard Lager	87 <input type="checkbox"/>	Draught Premium Lager
88 <input type="checkbox"/>	Draught Standard Bitter	89 <input type="checkbox"/>	Draught Premium Bitter
90 <input type="checkbox"/>	Nitro Keg Bitter	91 <input type="checkbox"/>	Stout
92 <input type="checkbox"/>	Bottled Lager	93 <input type="checkbox"/>	Premium Packages Spirits (ie Alcopops)
94 <input type="checkbox"/>	Wine	95 <input type="checkbox"/>	Spirits
96 <input type="checkbox"/>	Shooters	97 <input type="checkbox"/>	Cocktails
98 <input type="checkbox"/>	Hot Beverages	99 <input type="checkbox"/>	Soft Drinks
100 <input type="checkbox"/>	Food		

CHOOSE YOUR MAGAZINE AND WEBSITE, THEN SIGN AND DATE HERE TO RECEIVE REGULAR COPIES AND UPDATES

Please tick which magazine you wish to receive: (Email address for your free registration to magazine website)

101 Morning Advertiser and PubChef 102 Class

Signature _____ Signature _____
 Date _____ Date _____
 Email _____ Email _____

We will use this data to mail or phone you about this product or other similar WR products. We will also use this data to contact you about fax, email or text you about WR products (including this one) or allow carefully selected third party companies to let you know how you can benefit from similar offers (mail and telephone only). If you do not wish this to happen please tick the relevant box:

WR	Mail	Telephone	Faxing	Email	Text Messaging
	n/a	n/a	103 <input type="checkbox"/>	104 <input type="checkbox"/>	105 <input type="checkbox"/>
3rd party partners	106 <input type="checkbox"/>	107 <input type="checkbox"/>	We do not share your data with third parties for Email, fax or SMS purposes		

**PLEASE SEAL HERE
WITH SELLOTAPE**

PLEASE FOLD HERE – DO NOT TEAR

BUSINESS REPLY SERVICE
Licence No RCC 1797



CIRCULATION DEPT
WILLIAM REED PUBLISHING LTD
FREEPOST (RCC 1797)
BROADFIELD PARK
CRAWLEY
RH11 9BR