

GLOBAL COSMETIC INDUSTRY®

The Beauty Innovator's Resource

*FIRST NAME _____

*LAST NAME _____

*JOB TITLE _____

*COMPANY _____

*ADDRESS _____

*CITY _____

*STATE / PROVINCE _____

*POSTAL CODE _____

*COUNTRY _____

TELEPHONE _____

*E-MAIL _____

*REQUIRED

*What is your primary line of business? (Please select ONE)

- (7) Consumer Products Marketer, Manufacturer
- (14) Contract Manufacturer
- (9) Retail
- (8) Supplier/Distributor
- (15) Consumer Packaging
- (16) Testing, Equipment or Other Services
- (10) Consultancy
- (17) Investment & Finance
- (11) Allied to the Field

*What is your primary job function? (Please select ONE)

- (10) Corporate/General Management
- (11) Marketing/Brand Management
- (13) Public Relations
- (12) Packaging/Design
- (18) Research & Development
- (19) Manufacturing/Engineering
- (20) Purchasing
- (14) Allied to the Field

*I would like to receive news, updates, promotions and/or special offers from *Global Cosmetic Industry* magazine and other Allured Business Media products via e-mail.

- Yes
- No

*I would like to receive news, updates, promotions and/or special offers from industry partners via e-mail.

- Yes
- No

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- Yes
- No

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- Yes
- No

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