

Please print clearly.

Contact Information			
Name :			
Address :			Country :
City :	State/Province :		Zip/Postal Code :
Primary Phone :		Alternate Phone :	
Email Address :			
How did you learn about PhilCanAm Connections?			

Specific Project Requirements		(Please fill in as much as possible Information)	
Project type : Is this a new project or re-design ?		<input type="checkbox"/> New	<input type="checkbox"/> Re-design
		Estimated budget :	\$
Your current or intended website address (if applicable) :			
Describe your web project :			
If re-design, will content of existing website be used ?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
		Do you need Web Hosting (ISP) ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
What features do you intend to have in your web project ?		<input type="checkbox"/> Site Blog	<input type="checkbox"/> Content Management System (CMS)
<input type="checkbox"/> Member Registration	<input type="checkbox"/> eCommerce (Shopping Cart)	<input type="checkbox"/> Contact Form	<input type="checkbox"/> Photo Gallery and Video Shows
<input type="checkbox"/> Discussion Forum	<input type="checkbox"/> Social Media Integration	<input type="checkbox"/> Search Engine Opt.	<input type="checkbox"/> Others, please provide more info, below.

Who is your intended target audience (Geographical area, income level, industry, age group, etc.) ?			
What is your color preference ?			
How many pages (approximately) will your website have ?			
When do you need the new website completed ?			

Favorite / Competitors' Web sites		(Describe what you like and dislike about their web sites)	

Additional Comments