**Registration form for companies subject to the reporting requirement**

The enclosed form enables the implementation of the statuary reporting requirement.

All data you supply will be handled confidentially by the FSO in accordance with the Federal Statistics Act (SR 443.01), and will only be published in aggregated form.

We kindly request that you submit the completed form to

filmexploitation@bak.admin.ch.

|  |  |
| --- | --- |
| **Company name** |  |
| **Business identification number (UID)** |  |
| **Street** |  |
| **Post code** |  |
| **Location of main place of business** |  |
| **Tel. (incl. Country code)** | **+** |
| **Surname/first name/email address of contact** | **/       /** |
| **Remarks** |  |

We kindly request that you complete the section below even if the activities/functions stated therein

are not applicable to your particular case.

|  |
| --- |
| **Company registers as:****Distributor/sale of rights** yes [ ]  no [ ]  **Film sales/distribution : Retail trade:** yes [ ]  no [ ]  **Platforms:** yes[ ]  no [ ]  |
| **Field of activity:****Physical media** yes [ ]  no [ ] **Electronic on-demand/subscription services** yes [ ]  no [ ]   |
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