



**KENYA FILM CLASSIFICATION BOARD**

*E-mail: info@kfcg.co.ke*

*Phone: +254 20 2250600/2241804, Cell: +254 711222204,773753355*

**APPLICATION FOR CLASSIFICATION FORM**

Client's details

Name: .....

Production Company/Distributor: .....

Phone NO:.....E-mail address:.....

Physical location/address: .....Signature: .....

*The application is hereby made for Certificate of approval of the Film/Posters of the following descriptions:-*

Title of the Film: .....

Genre.....Director/Producer.....

**Category of classification applied:**

Movie  Broadcast Programme  Commercial  Music video  Video game

Others specify: .....

Running time: ..... Fees: .....

Posters: .....Fees: .....

Trailer: .....Fees: .....

For official use

Total payment received in Kshs: .....

Vide Receipt No: .....

Dated:.....

Signature of Officer: .....

Comments: .....

*N/B Cheques are payable to Kenya Film Classification Board*

Approved by: .....Signature.....