



## **Marketing Consent**

### **Why we obtain market consent from you?**

According to Personal Data Protection ACT 2010 in Malaysia, it is mandatory to obtain market consent from any individual before we conduct any sales activities within our business activities before we agree to establish our business relationships.

### **How we maintain personal data within our group?**

Please visit to our official website [www.ideed4u.com](http://www.ideed4u.com) if the website is under-maintenance please request a copy of hardcopy or softcopy of handbook from us under privacy and security policy.

### **Acceptance on invitation for sales appointment.**

Before accepting on our invitation, please help us to identify vulnerable individual.

This is confirmation is to validate that you are not one of below:

- Individual under 18 years old, categorized as children and minors who including orphans, unaccompanied, abused or neglected.
- Elderly persons who exceed official retirement age who including experiencing frailty, dementia, isolation, unaccompanied, abused, neglected, or who on long-term prescribed medicine.

### **Individuals with disabilities:**

- Physical, mental health confirm diagnosed by licensed doctor, developmental, or cognitive disabilities that limit self- protection.
- Individual experiencing homelessness: These lost home due to natural disasters, without stable housing or with often complex health needs and stateless person.
- Victim of abuse or trafficking: People subject to modern slavery, forced labor or sexual violence as well as under missing person report.
- Refugees and migrants: Displace persons, asylum seekers and those not fluent in any local language as well as victim from conflicts or war.
- Individual with substance use disorders: Those with addictions that severely impact their ability to function safely.



**Factors and the definition related our terms of vulnerable individuals:**

- Defenseless or unprotected
- At-risk person
- High-risk person
- Sub-marginal
- Dependent person

**Above descriptions are deems as below:**

- Individual who living in poverty and low income.
- Languages barriers, inability to communicate.
- Lack of supportive from family or lack of access to community network
- Low level of adult literacy, education or discrimination based on race or background.
- Living in unsafe areas or being red flags zone which officially declared in emergency and conflicts zones.

If you are above-mentioned individual kindly let us understand before we proceed with our business relationships before we divert yourself to a proper and fully legal channel for better supports.

**Agreement on market consent**

What are the personal data we are collecting from you?

- Name:
- Phone number:
- Email:
- Mailing address (Optional):

☐ For current appointment only

☐ Agree on future marketing purposes



**Please let us know modes of preferred communication.**

- ☐ Phone call
- ☐ SMS/ WhatsApps
- ☐ Email
- ☐ Postal mail

**Right of withdrawal**

Optional for withdrawal on market consent.

Any notifications received by

- 1) Text
- 2) Email
- 3) Call in
- 4) By written letter

From the date we received the service request, please expect the effect of ops off option within 48 working hours.

Please note that this service request is free of charge and it doesn't come with any limitations on this service.



**Acknowledged by**

Signatures:

Name:

Nationality:

ID/ Passport Number:

Date:

☐ **Conducted e-meeting, on-board without eye-witnessed**

☐ **Face to face, eye-witnessed**

Signatures:

Name:

Nationality:

Staff ID:

Date:

*Please note that to sign on this document shall deems as fully understand and aware of the documents.*

*This form is updated as of 25/03/2026*



## **营销许可**

### **为什么我们需要获得您的营销许可？**

根据马来西亚《2010 年个人数据保护法》，在开展任何销售活动之前，我们必须获得任何个人的营销许可，方可与您建立业务关系。

### **我们如何维护集团内部的个人数据？**

请访问我们的官方网站如官网维修中或要求我们提供的纸质版或电子版隐私和安全政策手册。

## **接受销售预约邀请**

在接受我们的邀请之前，请协助我们识别您是否属于弱势群体。

### **请确认旨在核实您不属于以下情况：**

- 未满 18 周岁的个人，包括孤儿、无人陪伴者、受虐待或被忽视的儿童和未成年人。
- 超过法定退休年龄的老年人，包括体弱多病、患有痴呆症、孤立无援、无人陪伴、受虐待、被忽视或长期服用处方药的老年人。
- 残疾人士，经执业医师确诊的身体或精神健康问题，以及发育或认知障碍，导致其自我保护能力受限。
- 无家可归者，因自然灾害失去家园、缺乏稳定住所或通常有复杂医药需求的人士，以及无国籍人士。
- 虐待或人口贩运受害者，遭受现代奴役、强迫劳动或性暴力的人士，以及失踪人员。
- 难民和移民，流离失所者、寻求庇护者、不精通任何当地语言的人士，以及因冲突或战争的受害者。
- 药物滥用者，因成瘾而严重影响其安全生活能力的人士。



**与弱势群体相关的因素和定义：**

- 无助或缺乏保护
- 处于危险境地的人士
- 高危人士
- 弱势群体
- 受抚养人

**以上描述如下：**

- 生活在贫困和低收入环境中的人士。
- 语言障碍，沟通不畅或造成无法沟通
- 缺乏家庭支持或无法融入社区网络。
- 成人识字水平、教育程度低，或因种族或背景而遭受歧视。
- 居住在不安全地区或被官方宣布为紧急状态和冲突地区的危险区域。

如果您属于上述情况，请在继续建立业务关系之前，告知我们，以便我们为您转介至正规合法的渠道，为您提供更好的支持。



## 市场营销同意书

我们将收集您的哪些个人数据？

- 姓名：
- 电话号码：
- 电子邮件地址：
- 邮寄地址（可选）：

☐ 仅限本次预约

☐ 同意用于未来的营销目的

请告知我们您指定的沟通方式。

☐ 电话

☐ 短信/WhatsApp

☐ 电子邮件

☐ 邮寄

## 撤回权

您可以选择撤回市场营销同意。

- 收到的通知方式如下：
- 短信
- 电子邮件
- 电话
- 书面信函

自我们收到服务请求之日期起，会在 48 个工作日内即可生效。

请注意，此服务请求完全免费，且没有任何限制。



### 经确认和认同

签名:

姓名:

国籍:

身份证/护照号码:

日期:

☐ 线上会议, 无现场见证人

☐ 面对面会议, 有现场见证人

签名:

姓名:

国籍:

员工编号:

日期:

*请注意, 签署此文件即视为您已完全理解并知悉文件内容。*

*此表格更新日期为 2026 年 3 月 25 日。*