

**ADVERTISING CONTRACT**

(July 1 to June 30)

NAME OF COMPANY \_\_\_\_\_

CONTACT PERSON \_\_\_\_\_

PHONE # \_\_\_\_\_ FAX # \_\_\_\_\_

ADDRESS \_\_\_\_\_

Address State Zip Code

BILLING ADDRESS \_\_\_\_\_

Address State Zip Code

MEDIA REPRESENTATIVE \_\_\_\_\_

Frequency  One Issue  Two Issues  Three Issues

Size  Full Page  Half Page Horizontal  Half Page Vertical

Quarter Page Regular  Quarter Page Vertical Column

AUTHORIZATION SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

I have read and understand that I am authorized to make a purchasing decision for my organization. I agree to pay all invoices within 60 days after publication. I understand that on the 61<sup>st</sup> day of non-payment, this contract will be cancelled and no further advertising will run until account is paid in full. This contract may be terminated by either part with 60 days advance notice. Any cancellations prior to closing date must be made in writing.