



ADVERTISING AGREEMENT FORM

16th Annual Fashion Show Luncheon

Friday, March 31, 2017- 10:30 a.m.

Four Seasons Hotel

ADVERTISING OPTIONS:

Program Book Dimensions: 8.5 x 11"

***Premium Placement Full Page Color Ad \$1,500**

***Full Page Color Ad: \$1,000**

*Full Page Ads May Use Bleeds at 1/8" or 8.125" x 10.75"

Half Page Color Ad (8.5 x 5.5"): \$500

ADVERTISEMENTS: Please have all Ads submitted to the CCMSA in HIGH RESOLUTION (300 dpi MINIMUM RESOLUTION) TIFF, EPS or JPEG digital format by **March 3, 2017**. Logos and Ads may be sent to gingerallen@gmail.com. Ads received after this date may not be printed and refunds will not be applied. Note: All Ads received will be printed as-is upon final authorization from CCMSA.

All Checks payable to CCMSA (Nonprofit Tax Id. No. 23-7290810) and remit to the address below.

COMPANY INFORMATION

Company Name: _____

Contact Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

E-mail: _____

Signature of Authorized Representative:

Signature

Printed Name

Title

Date

Please respond via mail or fax to:

Clark County Medical Society Alliance

Jessica Kartzinel, Fashion Show Co-Chairperson

2590 Russell Road, Las Vegas, NV 89120

Office: 702.567-4181 • Fax: 855.273.5481

jkartzinelCCMSA@gmail.com • www.ccmsa-lv.org

Internal Purposes Only: Advertising Agreement Form Received on _____.