

LAKELINE

Contract for Advertising Space

Advertiser Information

Advertiser: _____
 Contact Name: _____
 Address: _____
 City, State, ZIP: _____
 Email / Phone: _____

Signature: _____
 Title: _____
 Date: _____

Advertising Agency Information (if applicable)

Agency: _____
 Contact Name: _____
 Address: _____
 City, State, ZIP: _____
 Email / Phone: _____

Signature: _____
 Title: _____
 Date: _____

Issue Schedule

Spring Summer Fall Winter

Materials to Come

Digital
 Repeat from issue _____

Position Preferred

Front Portion
 Middle Portion
 Back Portion
 Other: _____

Ad Size

Business Card
 1/4 Horizontal 1/4 Vertical
 1/3 Horizontal 1/3 Vertical 1/3 Square
 1/2 Horizontal 1/2 Vertical
 Full Page
 Inside Front Cover
 Page 1
 Inside Back Cover
 Back Cover

Advertisers' Index

NALMS will list your company name and logo, linked to the website of your choosing, on our online advertisers' index. Your ad, itself, will also link to the website of your choosing.

Website: _____

Payment

\$ _____ Ad rate
 Frequency: 1x 2x 3x 4x
 \$ _____ Total Ad Contract

Invoicing

Send invoices to:
 Advertiser
 Advertising Agency

Accounts past due more than 90 days are in default. The above signed hereby agrees to pay all costs and expenses incurred by NALMS for collection of accounts in default, including reasonable attorney fees.

Special Instructions:



Send Contract & Ad Copy to:

Alyssa Anderson
 aanderson@nalms.org
 Questions? 608-233-2836