ADVERTISING INSERTION ORDER

Company Information

_____
Company Name

_____
Contact Name/Title

_____
Address

_____
City, State Zip

_____
Phone Email

Advertising Agency Information (if applicable)

_____
Agency Name

_____
Agency Contact/Title

_____
Address

_____
City, State Zip

_____
Phone Email

Payment Method

☐Send invoice to: ☐Company: ☐Advertising Agency
☐Enclosed is check # _____ (payable to PTDA in U.S. dollars)
☐Credit card: ☐MC ☐Visa ☐Amex
Credit card #: _____ Exp. Date ____ CV: ___

Name and address of card holder:

_____
_____
_____

_____
Authorized signature Date

Details

(Emailed on the 1st and 15th of every month.)

☐*Spotlight* top banner ad: $500
☐*Spotlight* bottom banner ad: $250

Transmissions

(Emailed quarterly; 1st and 4th issue are also printed and mailed.)

☐¼ page ad: $400
☐½ page ad: $800
☐Full page ad/advertorial: $2,000

Other: $ _____
Note: _____

Discounts

☐*Spotlight* only: _____%
☐*Transmissions* only: _____%
☐Overall: _____%

Insertion dates:

_____ _____ _____ _____
_____ _____ _____ _____
_____ _____ _____ _____
_____ _____ _____ _____

Total Amount Due: $ _____

Advertising contact:
Karla Zander, Director Networking & Events
Phone: 312.300.4640
Email: kzander@ptda.org

Please return form and payment to kzander@ptda.org.
If mailing, please return to: Karla Zander, PTDA, 230 W. Monroe Street, Suite 1410 Chicago, IL 60606