

## Advertiser Information

501c3 ORGANIZATION?  
 YES  NO

COMPANY / ORGANIZATION NAME \_\_\_\_\_ TODAY'S DATE \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

WEBSITE \_\_\_\_\_ PHONE \_\_\_\_\_

CONTACT NAME \_\_\_\_\_ CONTACT PHONE \_\_\_\_\_

CONTACT EMAIL \_\_\_\_\_

## Agency Information (IF APPLICABLE)

AGENCY \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

CONTACT NAME \_\_\_\_\_ CONTACT EMAIL \_\_\_\_\_ CONTACT PHONE \_\_\_\_\_

## Space Reservation SELECT AD SIZE & INSERTIONS

AD SIZE	RATE PER INSERTION*
<input type="checkbox"/> Full Page <i>Back Cover</i>	\$950
<input type="checkbox"/> Full Page	\$750
<input type="checkbox"/> Half Page <i>Vertical</i>	\$450
<input type="checkbox"/> Half Page <i>Horizontal</i>	\$450
<input type="checkbox"/> Quarter Page	\$200

\*20% rate discount for 501c3 organizations

INSERTION(S)*	SPACE RESERVATION	AD DUE
<input type="checkbox"/> July/Aug 2015	May 26	June 1
<input type="checkbox"/> Sept/Oct 2015	July 24	Aug 1
<input type="checkbox"/> Nov/Dec 2015	Sept 24	Oct 1
<input type="checkbox"/> Jan/Feb 2016	Nov 24	Dec 1
<input type="checkbox"/> March/April 2016	Jan 25	Feb 1
<input type="checkbox"/> May/June 2016	March 25	April 1

\*15% series discount for 3-5 insertions; 20% discount for 6 insertions

### CALCULATE TOTAL COST

	X		=		
RATE PER INSERTION		NUMBER OF INSERTIONS		TOTAL DUE	TOTAL w/SERIES DISCOUNT

## Terms

**RIGHT OF REFUSAL:** The Town of Wake Forest reserves the right to refuse advertising and may, at its sole discretion, edit, reject or cancel at any time any advertising submitted by advertiser.

**POSITIONING:** The back cover is a designated space. All other ads will be positioned at the publisher's discretion.

**ARTWORK:** All ads are full color. Artwork must be provided as a print-ready PDF.

**LIABILITY:** The town assumes no liability for any advertisement and is not responsible for errors in camera-ready ads. The town shall not be liable to advertiser for any loss that results from the incorrect publication, positioning or omission of its advertisements.

### SELECT PAYMENT METHOD

Order must be submitted and paid in full for ad space to be reserved. **All ad sales are final. No refunds.**

Visa  MasterCard  Check Enclosed

CARD NUMBER \_\_\_\_\_

EXPIRATION DATE \_\_\_\_\_ CVV CODE \_\_\_\_\_

### SUBMIT

Please return completed order form and full payment by the space reservation deadline to:

**Beth Andersen** | [bandersen@wakeforestnc.gov](mailto:bandersen@wakeforestnc.gov)  
 919.435.9422 | fax 919.435.9419

