

Company information: (please print)

Company Advertising: _____ Contact Person: _____

Street/PO Box: _____ Phone: _____ Fax: _____

City: _____ State: _____ Zip: _____ E-Mail: _____

SIZE OF AD:

Quarter Page _____

Half Page _____

Full Page _____

Color: _____ B/W: _____

COVERS:

Inside Front Cover _____

Inside Back Cover _____

Outside Back Cover _____

All Covers are 4-Color

DIGITAL 3-TIMES PLACEMENT – PLEASE LIST WHEN CONTRACT BEGINS AND ENDS:

CONTRACT BEGINS: _____ CONTRACT ENDS: _____

SINGLE ISSUE ONLY: (SPECIFY WHICH ISSUE): _____

ADVERTISERS'S SIGNATURE: _____

NB: This agreement is binding and your payment is non-refundable.

PAYMENT BY PAY PAL:

For Privacy/Security reasons, we no longer require your credit card information. Instead, Hollie Jones will send you an invoice via PayPal for you to pay directly with your credit card or PayPal account. Please indicate below if you will be paying by PayPal or sending a check. If sending a check, please read carefully how this should be done.

PayPal _____ Check/Money Order _____

***Please sign the contract below and send to:**

***Money orders or checks to be made out to: Institute of Advanced Sciences and mailed to:**
Institute of Advanced Sciences, 86 Faunce Corner Mall Road, Suite 410, Dartmouth, MA 02747

***Payments must be received with all orders. No advertisement will be published without payment.**

Signature: _____ Date of Order: _____