

WISDOM, WEALTH, AND WELLNESS
A Seminar for Women of All Ages

Saturday, September 19, 2009

INFORMATION

(PLEASE PRINT)

Name of Business/Organization _____

Contact Person _____

Address _____

City, State, Zip _____

Phone (_____) _____ Work (_____) _____ Cell (_____) _____

Fax (_____) _____ E-mail Address _____

Type of Product or Service _____

FEES

Please select your ad size:

- | | |
|---|--|
| <input type="checkbox"/> Business Card - \$50 | <input type="checkbox"/> Inside Cover - Half Page - \$500 (color) |
| <input type="checkbox"/> Quarter Page - \$125 | <input type="checkbox"/> Inside Cover - Full Page - \$1000 (color) |
| <input type="checkbox"/> Half Page - \$250 | <input type="checkbox"/> Back Cover - Half Page - \$500 (color) |
| <input type="checkbox"/> Full Page - \$500 | <input type="checkbox"/> Back Cover - Full Page - \$1500 (color) |

Please attach or email (pslade@sladeandassociates.com) a camera ready ad or business card for black and white printing. With the exception of the cover, all ads will be printed in black and white.

PAYMENT INFORMATION

Make checks payable to: Slade&Associates, LLC

CREDIT CARD INFORMATION Visa MasterCard Discover (

Card# _____

Authorized by (print name on card) _____

Signature _____

I authorize the amount stated above to be charged to the credit card provided.

Please attach the non-refundable payment to the completed form by August 21, 2009. All ads are subject to approval by Slade&Associates, LLC.

