Sheet1



Kansas DeMolay State Conclave Topeka, Kansas July 13-15, 2017

Program Advertising Sales Form

| Customer | | | | |
|------------------|-----------------------|-------------------------------------------------------------------|--------------------|----------|
| Address | | | | |
| City | State & ZIP | | | |
| Phone | Email | | | |
| | Size | | Black/White | Color |
| | ½ Page | 2 ² / ₃ " x 4 ¹ / ₄ " | \$25.00 | \$50.00 |
| | ½ Page | 5 1/4" x 4 1/4" | \$45.00 | \$70.00 |
| | Full Page | 5 ½" x 8 ½" | \$80.00 | \$105.00 |
| | Boosters | Name on Boosters Page | \$5.00 | |
| Total Amount l | Due | | | |
| | Ads receiv | ed after deadline will not be a | accepted | |
| | | Due June 1 | | |
| No ads will be o | excepted without pay | | c/o Kendall Garton | |
| Money MUST a | ccompany Ad Form | concyvine, KS 07557 | | |
| Ad Copy or Art | work needs to be copy | ready; dark colors are hard to | сору. | |
| Chapter | | | | |
| | | | | |
| | | | | |
| | Re | egistrar Use Onl | V | |
| Received By | | Date Received | Check # | |