

Community and Referral Guide Sponsorship Contract

Greater Waco Chamber of Commerce • P. O. Box 1220, Waco TX 76701-1220
 Contact: 254 757-5603 or 254 757-56000 • Fax 254 752-6618

Sponsor Firm _____

Name/Title of Authorized Representative _____

Address _____

Phone _____ Fax _____

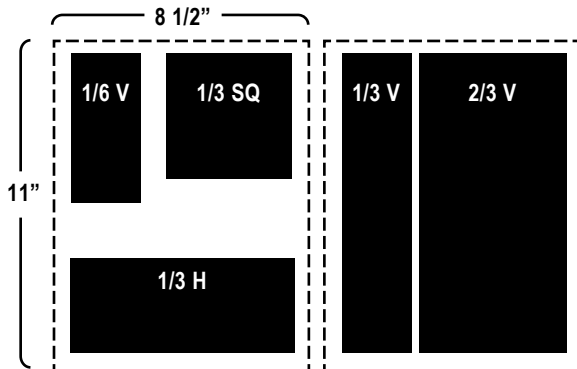
Email _____

*Signature _____ *Date _____

Circulation: 6,000

The Chamber does NOT build ads. Graphics must be supplied PRINT-READY. _____ Sponsor Initials

- Run same ad as last year*
- New ad will be submitted by Sept. 1*



Ad Dimensions	Width x Height	Guide 4-Color	Directory B/W
<input type="checkbox"/> Outside Back Cover	8.5" x 11"	\$6,200	—
<input type="checkbox"/> Inside Front Cover	8.5" x 11"	\$4,700	—
<input type="checkbox"/> Inside Back Cover	8.5" x 11"	\$4,700	—
<input type="checkbox"/> First Full Page Inside	8.5" x 11"	\$3,200	—
<input type="checkbox"/> Full Page	8.5" x 11"	\$3,100	\$2,450
<input type="checkbox"/> 2/3 Page, Vertical	4.92" x 10"	\$1,300	\$1,100
<input type="checkbox"/> 1/2 Page, Horizontal	7.5" x 5"	\$1,100	\$950
<input type="checkbox"/> 1/3 Page, Vertical	2.33" x 10"	\$950	\$850
<input type="checkbox"/> 1/3 Page, Horizontal	7.5" x 3.16"	\$950	\$850
<input type="checkbox"/> 1/3 Page, Square	4.92" x 4.92"	\$950	\$850
<input type="checkbox"/> 1/6 Page, Vertical	2.33" x 5"	\$650	\$550
<input type="checkbox"/> 1/6 Page, Horizontal	4.92" x 2.5"	\$650	\$550
<input type="checkbox"/> Guaranteed Placement +10%			
<input type="checkbox"/> Additional Category Listing (in Directory section) \$75			

ARTWORK REQUIREMENTS - Graphics sent in Publisher will NOT be accepted.
 All artwork must be submitted as print-ready, CMYK four-color, with **1/8" bleeds for full page ads** and must be supplied digitally as EPS, TIFF, PDF or JPG (300+ dpi) for IBM/PC.

Please supply artwork immediately to ensure placement.
 No cancellations will be accepted after the closing date. _____ Sponsor Initials

Your commitment impacts the operational budget of the Greater Waco Chamber, therefore it is not refundable.

Sponsorship Amount \$ _____ Contracts do not roll over.

- Check enclosed. Make payable to Greater Waco Chamber.
- Credit Card: American Express MasterCard Visa

Name _____

Number _____ Exp Date: _____ Verification Code # _____

CC Billing Address with zip code _____

Sponsored By

Volunteer's Name _____

Team _____ Date _____