



Advertising Agreement

Business Name: _____

Contact: _____

Phone: _____

Address: _____

Email: _____

Ad Sizes:

___ Full Page \$300
(8.00" w x 10.5" h)

___ 1/2 Page \$200
(8.00" w x 5.25" h) or
(4.00" w x 10.5" h)

___ 1/4 Page \$100
(4.00" w x 5.25" h) or
(2.00" w x 10.5" h)

___ Inside or Outside Back Cover \$500
(8.00" w x 10.5" h)

___ Shout Out \$25

(Name will be included in program in support of team)

Camera Ready Ad Content: Supplied: No Charge

Produced: Up to 1/2 Page \$40 Full Page \$75

Ad copy & payment must be received by February 20, 2018

Mail payment to Circle of Hope, PO Box 833 Cornelia, GA 30531

Email ad artwork to dwtsforhope@gmail.com

Agreement Confirmation: The signature below signifies agreement to the above advertisement placement in the *Dancing with the Stars for Hope* event program.

Advertiser (print name)

Advertiser (signature)

Date

DWTS team/s supported with this ad agreement: _____