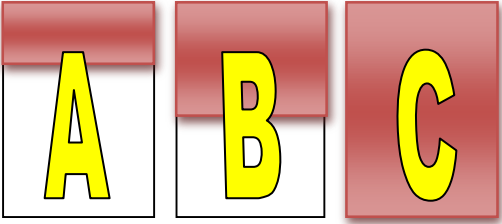


ADVERTISING CONTRACT (2018-2019 Season)

BILLING INFORMATION	ADVERTISING RATES																								
Business Name: _____ Contact: _____ Address: _____ City: _____ State: _____ Zip: _____ Telephone: () _____ Fax: () _____ Email Address: _____ Method of Payment: Fill in all that apply Check #: _____ VISA MasterCard AMEX Discover (Circle One) CC#: _____ Expiration Date: _____ CVV Number: _____ (3 or 4 digit security code) Signature _____ DGMC must receive your ad copy <u>and</u> contract by Friday, November 2nd, 2018.	<table border="1"> <thead> <tr> <th></th> <th>Size</th> <th>Season Price</th> <th>Please Indicate Selection</th> </tr> </thead> <tbody> <tr> <td>A</td> <td>Quarter Page 5.5" x 3"</td> <td>\$175</td> <td></td> </tr> <tr> <td>B</td> <td>Half Page 5.5"x4.25"</td> <td>\$250</td> <td></td> </tr> <tr> <td>C</td> <td>Full Page 5.5" x 8.5"</td> <td>\$350</td> <td></td> </tr> <tr> <td></td> <td>Inside Cover 5.5" x 8.5"</td> <td>\$450</td> <td>ONLY 2 AVAILABLE</td> </tr> <tr> <td></td> <td>Back Cover 5.5" x 8.5"</td> <td>\$600</td> <td>ONLY 1 AVAILABLE</td> </tr> </tbody> </table>  <p>Seasonal Ad: Your ad will appear in our two annual concerts (December, 2018 and June, 2019). Your business information will also be listed at our March 2019 special concert and on our website during the <u>entire</u> 2018-2019 Season.</p>		Size	Season Price	Please Indicate Selection	A	Quarter Page 5.5" x 3"	\$175		B	Half Page 5.5"x4.25"	\$250		C	Full Page 5.5" x 8.5"	\$350			Inside Cover 5.5" x 8.5"	\$450	ONLY 2 AVAILABLE		Back Cover 5.5" x 8.5"	\$600	ONLY 1 AVAILABLE
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Ads can be submitted directly by email to president@daytongaymenschorus.org. Acceptable graphic formats include JPG, PNG, TIFF and PDF. * Please indicate on the next page if you are using your previous ad.

- Payment for ads and contracts can be given directly to a chorus member or mailed to our office: The Dayton Gay Men's Chorus / P O Box 642 / Dayton, OH 45401-0642. Checks can be made payable to The DGMC. When paying by CC, by signing you authorize DGMC to make a one-time withdrawal of the approved amount listed on this contract.



ADVERTISER NAME: _____

NOTES AND SPECIAL INSTRUCTIONS
Please indicate if you will be using an ad from our last season

AD SIZE	RATE	ADDITIONAL CHARGES / DISCOUNTS	TOTAL COST

The advertiser placing advertising covered by this contract, and the Dayton Gay Men's Chorus, hereby agree that this contract shall be governed by the following conditions:

- (1) The subject matter, form, size, wording, illustration(s) and typography of the advertisement shall be subject to the approval of the DGMC. If the advertiser has contracted for a series of insertions, and prior to final proof deadline copy for the next issue has not been received by the DGMC, a previous ad may be run after notification to the advertiser of such action.
- (2) The DGMC cannot and does not warrant the accuracy of the information supplied to or gathered by the advertiser or its representatives, and no liability can be assumed by the DGMC for this information. Omission of all or part of the advertisement or other error in the advertisement shall result in an adjustment of charges to the advertiser that shall be a pro-rated abatement of charges to the degree the error or omission affects the entire advertisement. In no case, however, shall the DGMC's liability exceed the total charges for services.
- (3) Advertiser agrees to pay for all advertising published or produced by DGMC on the advertiser's behalf in accordance with this contract. All ads must be prepaid. A \$35 charge will be assessed by the DGMC for checks returned due to insufficient funds. It is agreed that the advertiser shall pay any collection expenses or legal fees incurred in collecting this revenue.
- (4) All artwork is to be provided in a DGMC-acceptable format. If artwork is not provided in proper format, design / production charges will be billed in addition to the ad costs at a rate of \$50 per hour with a \$50 minimum charge.

Advertiser Name (Print) _____

Advertiser Signature _____ Date _____

DGMC Rep Name (Print) _____

DGMC Rep Signature _____ Date _____