



# NEWSLETTER

## ADVERTISING RATES

### 2020 INSERTION ORDER

#### Requested Publication Issue(s):

- Spring (March) 2020    Summer (May) 2020    Fall (September) 2020    Winter (November) 2020

The deadlines for advertising materials are the following: **Spring issue** - February 1; **Summer issue** - April 1; **Fall issue** - August 1; **Winter issue** - October 1. Due to space constraints, ads are accepted on a first-come, first-served basis. Please submit this completed and signed insertion order as as soon as possible to assure optimum advertising space. All ads should be produced as RGB or Index color and provided as 72 dpi jpg, png or gif files to Ray Hall via email at ray@societyhq.com. Ad production services are available for an additional fee of \$110 per hour.

- PLEASE PRINT -

Advertiser \_\_\_\_\_ Today's Date \_\_\_\_\_  
 Billing Client \_\_\_\_\_ Contact Person \_\_\_\_\_  
 Billing Address \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_  
 Email Address \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_  
 Headline \_\_\_\_\_  
 Authorized Signature \_\_\_\_\_  
 Requested URL link \_\_\_\_\_

**If you reserve ad space in all four issues of the VOS Newsletter, there is a 25% discount per issue.**

**Total Amount Due \$** \_\_\_\_\_ P.O. / Insertion Number (if applicable): \_\_\_\_\_

FULL SIZE	HALF SIZE	QUARTER SIZE
<input type="checkbox"/> 1x rate - \$850	<input type="checkbox"/> 1x rate - \$450	<input type="checkbox"/> 1x rate - \$250
<input type="checkbox"/> 4x rate - \$637 each	<input type="checkbox"/> 4x rate - \$337 each	<input type="checkbox"/> 4x rate - \$187 each
Size: 750 px x 400 px horizontal	Size: 400 px x 200 px horizontal	Size: 200 px x 200 px

At the time of publication, your invoice will be issued. Payment is due within 15 days of invoicing or you may prepay for your ad. You will receive a link to the newsletter along with your invoice or receipt.

- Invoice me    Payment with Credit Card

Special Instructions: \_\_\_\_\_

**Method of Payment:**    Check    VISA    MasterCard    American Express  
 Card No: \_\_\_\_\_ Exp. Date \_\_\_\_\_ CVV Security Code\* \_\_\_\_\_  
 Signature \_\_\_\_\_ Printed Name on Card \_\_\_\_\_

\*CVV code is the three digit number on the back of VISA or MC or 4 digit number on the front of AMEX card above the account number.

For payment by check, please make payable to **PSVA** and mail to:

**Virginia Orthopaedic Society • 2209 Dickens Road • Richmond, VA 23230-2005**

Phone (804) 565-6321 • Fax signed and completed form to: (804) 282-0090 • Email: ray@societyhq.com

**Email Completed and Signed Insertion Order to ray@societyhq.com**