Faubourg Marigny Newsletter

Ad Contract

Please Fill Out:

1. Ad Size

__ Full Page __ 1/2 Page __ 1/4 Page __ Business Card __ 1/4 Pg Back

2. Months (Choose All or select individual months. Indicate year below each month)

__ All (10 months) Or __ Circle the months :

Jan	Feb	Mar	Apr	May	Jun	Aug	Sep	Oct	Nov
___	___	___	___	___	___	___	___	___	___

3. Ad Cost _____ X _____ + _____ = _____

# of Months | Rate* | Membership (optional) | Total

* Rates (1-2 times/year)	Full Page	1/2 Page	1/4 Page	Business Card
Business Member	$110	$55	$40	$25
Non-business Member	$113	$58	$43	$28
Rates (3+ times/year)	Full Page	1/2 Page	1/4 Page	Business Card
Business Member	$90	$45	$30	$18
Non-business Member	$93	$48	$33	$21

4. Signature

_____

Name of Business

_____ _____

Signature *Date*

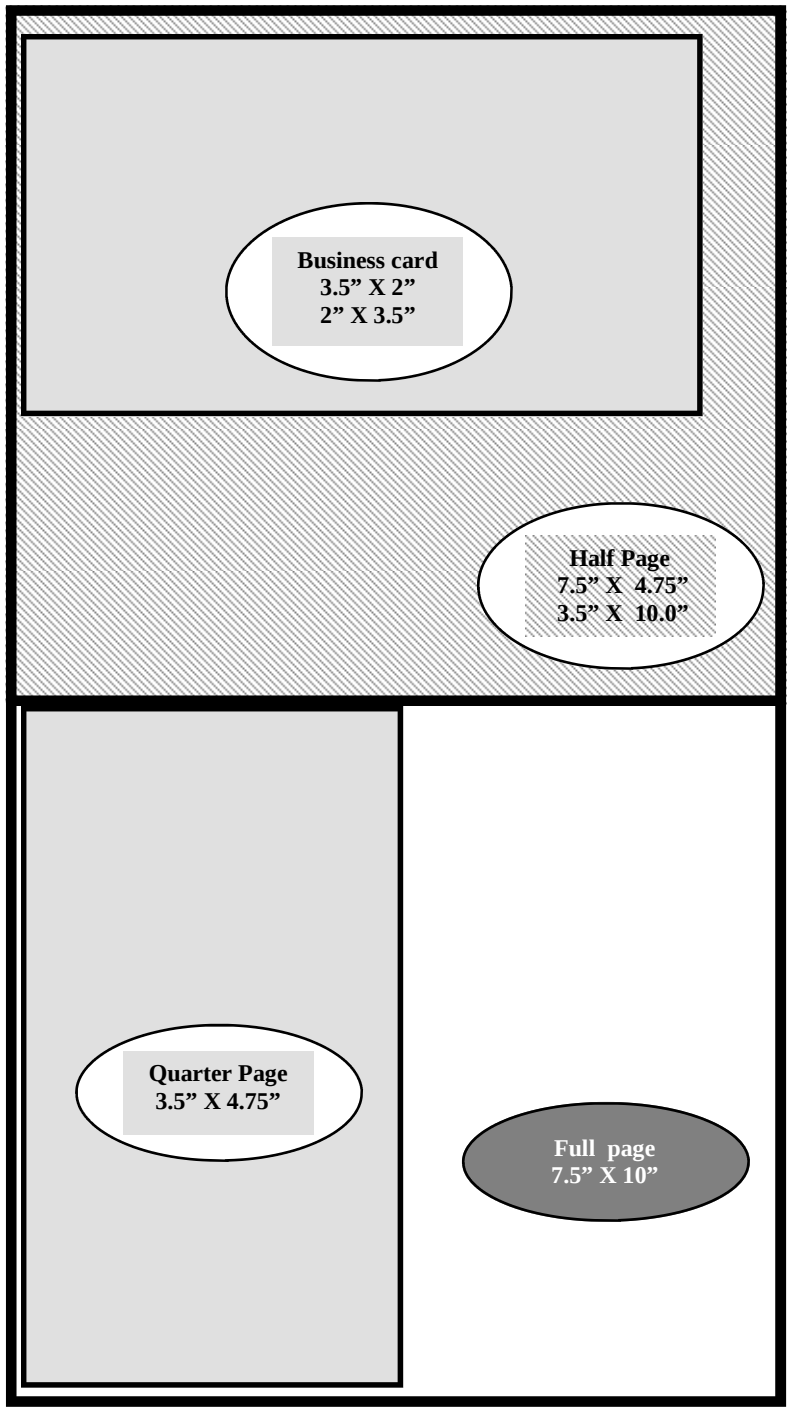
Office Use Only

Received:____/____/____ Check number:_____ Have Ad?____

Make checks payable to:

F.M.I.A

Mail to:

F.M.I.A
PO Box 770080
New Orleans, LA 70177

Questions or to collect check call 888-312-0812