

# ADVERTISING AGREEMENT

Deadline for submitting completed agreement and payment is September 1, 2017.

Contact \_\_\_\_\_

Organization \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

## AD SPECIFICATIONS:

- All ads must be camera ready in either pdf, jpg or tif format
- Program trim size is 8½"x11", no bleeds
- Ads must be in black and white
- Photographs: 133- to 150-line (LPI) with 266 to 300 dots per square inch (dpi)

## AD SIZES:

| Type                                       | Size      | Cost  |
|--|-----------|-------|
| <input type="checkbox"/> ¼ page (V)        | 3¾" x 4¾" | \$300 |
| <input type="checkbox"/> ½ page (V)        | 3¾" x 9¼" | \$500 |
| <input type="checkbox"/> ½ page (H)        | 7½" x 4¾" | \$500 |
| <input type="checkbox"/> Inside, full page | 7½" x 10" | \$725 |

## AGREEMENT:

Advertisers and/or agencies, jointly and separately, agree to indemnify and hold TACFS harmless from and against any loss, liability, or expense arising out of copying, printing, or publishing of advertisements. All advertising subject to approval by TACFS. TACFS reserves the right to reject advertising.

Signature \_\_\_\_\_ Name (Printed) \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

## PAYMENT INSTRUCTIONS:

- Make checks payable to: Texas Alliance of Child and Family Services
- Mail checks and completed agreement to: TACFS, 409 West 13th Street, Austin, TX 78701, or fax to (512) 892-6977

**Credit Card Payments:** Please complete all information below.

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Billing Address of Card: \_\_\_\_\_

City, State, Zip of Card: \_\_\_\_\_